

In The United States District Court
For The District Of Delaware

Al-Muhammad Alek Shalaby,

A/K/A Roger L. Dennis Jr.

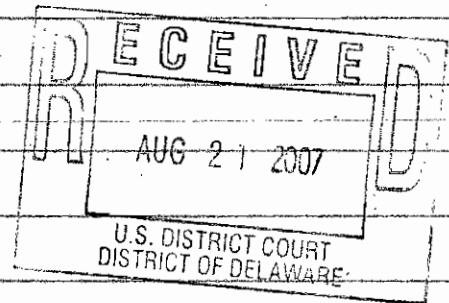
Plaintiff,

Civ. No. 06-372-GMS

V.

First Correctional Medical
Services and Correctional
Medical Services, INC.,

Defendants



Plaintiffs First Set of Interrogatories Directed
To Defendants & Their attorney James E. Dines, Esquire
Balick & Balick

I the Plaintiff of this Case hereby move for your honor to schedule an emergency trial for this case and deny the Defendants motion for dismissal of this case for which "they" say "I" the Plaintiffs are prejudice, and without Merit. The Defendants are trying to cover up their ongoing negligent behavior, and I plan to prove all of this at trial or a private hearing before your honor.

I have plenty of evidence and witnesses that work for DOC that have dealt with me that will come forth, and prove that the Medical system has been negligent.

1. I wouldn't even proceed with this if I wasn't 100% sure that the medical system is at fault for all my claims.

a. I am acting as my own attorney at this time, and please remember I am no scholar with law by any means.

b. I have filed in a timely matter and I've complied with all paperwork by law. At the time I am not working my rights are and have been violated, and I'm fighting for my life here.

2. I will be supplying copies of all grievances, and all paperwork as Exhibits where Doc also as well as the Wardens, Cpts, Security Chiefs so forth have been investigating all this as well.

3. To a certain extent Delaware Correctional Center is Bias against me as well. Not all, but most of administration so forth, because I've involved the Secs to uncover alot of this dirt they are covering up trying to keep it out the media, the community, and our families.

I'm enclosing all paperwork to show you the pattern of negligence so forth. I can prove under American legal practice a party, and I the plaintiff can establish my injuries which I am entitled Relief, and Compensation.

So to medicals negligence I was also terminated from my kitchen job, and I lost wages, and that's how I was providing, and taking care of myself.
(Patient)

Medical Info is confidential, and FCM, and CMS had leaked my medical personal file to certain guard whom has no business knowing my medical situation, and more my mental health business, and I have letters from the Chaplin, and proof of what I'm going through, and why I'm stressed, and so forth.

Exam all paperwork I am submitting, and read it thoroughly, and you'll see why I won't drop this at all. I'll fight this if it kills me. My family, Children and relatives mean the world to me.

Now to answer your questions:

1) My full name is Mr. Al Muhammad Aleck Shalaz alias Mr. Roger L. Dennis Jr. DCC Prison lived past 10 yrs.

2) N/P Shirell A. OTT, Dr. Dale Rodgers, Dr. Vardooze, former Dr. Louetta Brown, N/P JOMA a DCC Health Care provider P.O. Box 500 Bryans Dela DCC Medical 1977. Dr. Louise Lasiers whom has treated me from Dec-06 to now & continues to do so. The paperwork enclosed shows times, Dates and whom did what.

3) Kitchen Lt. Sheryl Morris head of Dela Corr. Center Main Kitchen.

4) Yes CMS is liable for medical negligence. Paper work provides, Breaches times and Dates.

5) Back Lower Discs, asthma, High Blood pressure Chronic Migraines
hard time Breathing & Can't hear out Right Ear constant infections and
drainage.

6) Divorced

7) Born Down since 1983/expected to End 4-08-2010

8) Whatever is necessary.

I am Including a copy of the Summary
of Events I ask Your Honor to Subpoena The same
witness in the Summary of Events.

(Pg 4)

Certificate of Service

I, Al-Muhammad Alack Shalazz, hereby certify that on the 15th day of August 2007, the foregoing Plaintiffs Motion should be acknowledged that I request to pursue this case before a judge and jury, and that I am serving papers to the Court and certified copies to the following:

Balick & Balick LLC attorneys
151 James E. Dineen, Esquire (3789)
711 King Street
Wilmington, Dela 19801

Al-Muhammad Alack Shalazz
aka Roger L. Dennis Jr.
SBQ 00241736
1181 Paddock Rd.
Shiraz, Dela 19977

Aug. 15th 07

(Summary of Events)

(page 2)

1) On this date Thursday March 23rd 06 11am my ear was damaged by a fall on the edge of desk. Metal desk in Cell B-dower 11 Bldg 22. Witnessed by Inmate Bryant L. Cannon, and David Smith whom applied wet Rag on Right ear, and held it until staff came on the tier. Sgt. J. Juman and Cpl. M. Burton were working this day whom immediately called nurse. Nurse Shari Duanne Neal came down to look at it, and she called N/P Dr. Sherell A. OST and said it may need stitches, and on the phone she told OST to bring the big baby some Candy. Insulting my character as a man, and a muslim. From this date I haven't been able to hear anything out my Right Ear. 2pm N/P Dr. Sherell A. OST showed up to take a look at it said I may need stitches. She cleaned it dressed it and said she'll check back with me in a couple of days.

2) March 25th 06 3:41am Nurse Kay gave me antibiotics for ear, and regular meds. 6:45pm Nurse Clayton Reader called me out checked ear it was still bleeding and black purple, and green seriously bruised still Can't hear. She told me they should have sent me out the day this happened, because it still looks bad. She said she'll put me back down Monday to be seen by Dr. Sherell A. OST I still Can't hear out Right Ear.

3) Tuesday March 28th 06 Halted at Counselor Cindy A. Atallian told her what happened to ear, and showed her. Told her what was going on with medical and she said she'll be on top of that, and personal issues with family. She said she'll get with Sherell A. OST & medical and they've also been dealing with back ^{why} issue. I've been without my back brace since Feb. 2001. 1:30pm this same day N/P Sherell OST (MA) Adrienne Branch (MA) K. Pann came over to see me. I was told I may have to go out to hospital ENT in 3 weeks after Clay Wax / with Blood behind it doesn't come out with eardrops and if meds don't work. 3:30pm Nurse Rebecca E. Viet called me out to redress ear. They didn't give me Ear plugs to protect ears from water during shower or anything. March 29th 06 Nurse Shari Duanne Neal started talking real foul out her mouth, because I was given orders to put drops in ear put Cotton ball in ear to protect meds. She halted it's your "damn" ear do what you want see if I care. I filed grievance on her and Cotton to my counselor and her boss.

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45. April 2nd 06 Nurse Rebecca E. Viet gave me migraine headache meds, but not new meds N/P Dr. Sherrell OIT ordered, Nor did she check ear as requested. Filed another medical grievance on Nurse Duanni Neal. Inadequate Treatment.
46. April 3rd 06 filed grievances on medical, because I wasn't getting any of my meds, and nurses starting cursing and disrespecting me.
47. April 4th 06 made ^{Who Sherrill Taylor, Burrell} everyone aware I still can't hear, ears draining, and I still get very serious headaches that keep me from sleeping.
48. April 5th 06 Had Sgt Cain contact my counselor Cindy A. Atallian.
49. April 7th 06 OIT here to see me. 1:30pm was just getting out shower. Sherrell OIT said my counselor called her so she came over to see me. I told her pain meds weren't working and there's constant pain. Things began to get out of hand and ridiculous, ~~so it led to me filing this suit.~~
50. April 10th 06 Claylyn Leader had to check on my meds because I didn't get them, so she said she had to call Shari Duanni Neal. Tuesday April 11th 06 mental Health Monet came down to see me about all the drama that's been going on.
51. ^{Who} Monet got angry with me, because I told counselor Atallian to get with her and let her know I need to talk to her. Monet snapped on me and said she doesn't like to be pressured, but I let her know I'm court ordered to see mental health.
52. April 12th 06 CBD Pater ^{WITNESS} & Sgt E. VanHarden was on the tier with nurse Rebecca E. Viet, and I was explaining to her that the Dr told me I didn't have to keep putting sickcall slips in to be seen, and she started talking all crazy cursing so forth and I told her I'm not going to argue with her; I'll deal with all this inadequate treatment in Court. She made it sound like I was threatening her which was not the case.
53. April 15th 06 Ear still killing me so I put sickcall slips in.
54. April 16th 06 3:53pm meds Sunday Nurse Rebecca E. Viet said Nurse Practitioners will be over tomorrow.

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who - SAME - who

14) I wrote everyone and spoke to everyone about the pain in my ear and me not being able to hear anything. Cpl. Marshall, my ^{WITNESS} counselor Cindy A. Attalian, spoke to Cpl. D. Hastings, Lt/Lt Alisa Profaci and the Lt's whom been assisting to make sure I'm seen.

15) April 18th 06 1:30pm Called out by NP Sherrell A. Ott she flushed ear a ball of wax came out, and she thought maybe that's why I could not hear, and then she told me now there's a infection in the ear, and once this clears up I should be going out to the outside for a ENT specialist Ear Nose & Throat Doctor.

16) April 21st 06 Counselor Cindy Attalian mailed me memo which will be enclosed as exhibits and proof throughout this lawsuit.

17) April 22nd 06 More problems with the pain meds I should be getting, but haven't been Nurse Clairlyn Reader said she'll check on them.

18) April 23rd 06 7pm Nurse Clairlyn Reader called me out to flush ear gave me ear-drops and said she's going to talk to OTT. From the Order she saw No pain meds were ordered like NP Sherrell A. Ott said she would.

April 25th 06 I asked Sgt. V. Kinloch has the Dr. ^{WITNESS} been over because she was suppose to have came ear in the week.

19) C/o K. Hughes Black female officer called me out 10pm April 27th 06 out of concern to see if I was seen by the Dr. because she saw I was in a lot of pain with a lot on my mind.

20) April 28th 06 Spoke to Counselor Attalian earlier today during classification and Lt. J. Deacord. Was Classified Out she ask me about my ear and meds, and so forth. I told her I'm still not getting what I'm suppose to be getting. She called after Classification 1:30pm Ott showed up over to see me I missed Muslim service which I attend every Friday to hear once again I'll have to be sent out. Still Can't hear, and ear in a lot of pain.

21) April 29th 06 4:00 am Nurse Kay was ^{WITNESS} suppose to brought me ear-drop, and she gave me a box of eyedrop instead of ear drop. I told her I got ear drop. She argued with me until I showed her she was wrong. It took someone else to straighten her mess out. I filed

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cont → ^{GRIEVANCE (NO RESPONSE)} paperwork on this incident. No one did anything about any of the grievances so forth. That's why I'm filing this suit. Inadequate treatment. Nurse Kay came back told me I was wrong to try to hold evidence against her that she gave me the wrong med. How was I wrong when all she wanted to do was argue?

Q1: OSt. wound up upping the dosage of ~~Ativan~~ pain meds for the ear.
 (22) April 29th 06 Saturday Nurse Rebecca E. V. ~~dict~~ argued with me again saying she didn't see a order for meds being upped.

(23) Monday May 1st 06 I had Cpl. G. Marshall ^(WITNESS) call and he spoke to Adrienne Blanch Medical Assistant, and she told him more than likely they'd be over Wednesday to see me.

May 2nd 06 Nurse ~~Rocky~~ ^{list} forgot pain meds said she'd be back, and she never came back with any of ~~my~~ ^(records) meds.

(24) May 4th 06 Nurse Luanni disrespected me by calling me by my alias Roger Dennis Jr. when she been calling me by my muslim legal name. Then she told me and I quote if I have a f---ing problem with it write her boss ~~James~~. She tried to insult my character and disrespect me as a man. I wrote her up. She didn't even answer that grievance.

(25) May 5th 06 Nurse Luanni tried to say there was a discrepancy with my meds. All she was doing was still ~~met~~ ^{met} picking because I didn't argue with her. I walked out and wrote her up.

(26) May 8th 06 OSt came down to see me to clear discrepancy with meds. She told me she'd take care of it. She said she'd be back to see me Friday. All this should be logged in a log book and my counselor could issue copies of all the letters I wrote her about these incidents.

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27) May 13th 06 Sat I filed a emergency sickcall slip ~~Nurse Becky~~ said is it a emergency she walked away, but my ear was bleeding out, and she did nothing about it, so I did what I had to do file paper work.

28) May 16th 06 9:20am was called to go to Bldg 24 to see mental health Dr. Kurnellu. I told him about all the problems he checked my medical file saw that there may have been a misprint where I was getting to strong dosage of Zantac, so he lowered the dosage which medical file should & could be subpoenaed.

29) May 22nd 06 1:30pm Mental Health Monet came to see me. I told her the problems, and that I haven't heard back from my counselor after 3 letters I wrote. There was nothing threatening nor offensive. I told Monet Counselor Atalliam had sent me a letter with one line telling me she sent a copy of my letter to Staff/St Profaci for her review on May 10th 06. I haven't heard from my counselor since then. She said she'll talk to her and send me a memo Friday to let me know what's what. I never got a letter nor memo from Monet Friday or as of yet.

30) Sunday May 26th 06 meds were passed out 3am I let the nurse know and showed her where my ear had been draining and bleeding so she told me she couldn't take the sickcall slip she might get fired. 11:55am on my way to lunch I pushed the sickcall under the medical door, and I informed St. Michael Welcome of incident so he called Dr OTT. I went to Jumuah service 3pm I was called MA. K-Cann NP Sherell OTT & Nurse Luanni were in the Medical Dept. Sherell said the St. Called her said I hadn't been seen by her which was a lie, but she had a attitude with me. She checked my ear once again the infection is back, I still can't hear and I'm still catching alot of flack about my meds, and then doing their jobs. Nurse Luanni, and I had a argument, and then when I was leaving medical a guard approached me in a threatening manner, took his belt off with mace on it, and his cuffs threw it on the floor. I took my shirt & kufi off, and things were heated from there.

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Sgt. J. Jarman & C/o P. Calhoun C/o M. Owey stopped the incident before it escalated. That's where everything stands now. Now I turn to the court because I know I have a very strong case that I request to be tried by Judge & Jury.

My witnesses to this case are officers and inmates, Nurses

- (1) Cpl. S. Marshall
- (2) Counselor Cindy A. Atallian
- (3) C/o S. Hastings
- (4) C/o K. Hughey
- (5) Sgt. C. VanSorder
- (6) C/o Clinton Passley
- (7) I/m Bryant L. Cannon
- (8) I/m David Smith
- (9) Nurse Clairlynn Reader (Transferred Georgetown Medical as of 5-31-06) 5-30-06 Tuesday was her last day here. He saw me on 5-30-06.

All to be subpoenaed if ~~this~~ case has to go all the way to trial. The Institution is Responsible for the loss of property which will be attached as my exhibits.

For the 5 yrs I've been without my back brace, I'm seeking \$50,000 dollars every year. That comes to \$250,000 for 5 years. As far as my ear it's a possibility that I could suffer permanent hearing loss for the medical Department neglecting to send me out trying to save the state money, I'm seeking \$550,000 dollars. Altogether that comes to \$800,000 dollars. I also request that this suit be paid for by the Department of Corrections or the Medical Dept, because they are responsible for the damages.

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Under American legal practice a party (generally a plaintiff) who has established that he or she has suffered an injury is entitled to relief. This relief is called a "remedy" and may come in various forms. Common judicial remedies in American courts include damages, injunctions, mandamus, and awards of cost and attorney fees. The monetary damages may be awarded by a court fall into three broad categories: 1) actual damages, including out of pocket, or pecuniary losses as well as compensation for physical and mental suffering; 2) nominal damages, when no damages were sustained; and 3) punitive damages, sometimes called "exemplary damages," are only allowable when actual damage has been suffered and the acts causing the injury were so reckless, wanton, malicious, or intentional as to warrant an additional damage award. In this case the pain, and suffering and my hearing loss in my right ear, and my migraine headaches, and back pains from a assault done by guards.

See Mack v. Johnson, 430 F. Supp 1139 (E.D. PA. 1977) affirmed without opinion 582 S. 2d 1275 and Appeal of Smith, 582 S. 2d 1276 (No opinion)

Actual (or Compensatory) Damages see Wilson v. Donovan, 218 F. Supp 944 (D.C. La. 1963), affirmed J. Smith and Son, Inc. v. Wilson, 328 F. 2d 313, cert. den. 85 S. Ct. 31, 379 U.S. 816

Under 5th Amendment U.S. CA. I am entitled to a jury trial I am using & stressing my right to be appointed counsel if this goes all the way to trial.

See Buell Hendricks v. Coughlin 114 S. 3d 340 (1997) also see Cooper v. A Sargenti CD 877 S. 2d 170, 174 2d (Cir 1989)

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with all meds W/P Shereell A. OS has tried; the excruciating pain continues, and many sleepless nights, and the most damaging thing is I still can't hear out my right ear and continue to get infections, and have not yet been out for a ENT to see what the extent of the damages are. The ear continues to drain, and I'm in serious pain while the state tries to save money rather than to send me out.

Therefore I'm at the Courts Mercy asking that you get involved, and order the prison and Medical System to send me to a specialist.

And for the foregoing reason I don't have a job and I only get money every now & then from family on the streets; I wish to enter this case forma pauperis.

Mr. Al-Muhammad Alsek Shabazz (Alias
Signature: Mr. Al-Muhammad Aleek Shabazz (Mr. Roger Denny)
June 1st 06

**DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER**

This request is for (circle one): MEDICAL DENTAL MENTAL HEALTH

(Client Requesting)

Al-Muhammad Aleek Shabazz
Name (Print)

MH4 Bldg 22 B-6-11
Housing Location

April 13
Date of Birth

00241736
SBI Number

3-24-06
Date Submitted

Complaint (What type of problem are you having)? My ear has to be flushed and
cleaned. It's split, & I can't hear out of it. It's still swollen
happened yesterday 3-23-06 I see NP Dr. Marshall. It has to be cleaned and
I should be getting Motrin & antibiotic

Al-Muhammad A. Shabazz
Inmate Signature

3-24-06
Date

The below area is for medical use only. Please do not write any further.

S: Order to flush ear.
cp sever pain cannot hear out
right ear. Pain meds not working

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

I/M seen on 3/25/06. Motrin
A: not working wants something
stronger

P: I/M is to have F/U with
provider on 3/30/06. Will request
that I/M be seen earlier

E:

C. Braden
Provider Signature & Title

3/26/06 @ 1700
Date & Time

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF DELAWARE

Al-MuHAMMAD ALEK SHABAZZ,
A/K/A ROGER L DENNIS, JR.
Plaintiff,

v.

First Correctional Medical Services, et al.;
Correctional Medical Services, Inc., et al.;
Stanley W. Taylor, and the Del. Dept of Corr,
et al.; and Thomas L. Carroll, and the Del. Corr.
Ct., et al.

Defendants.

Civ. Action No. 06-322-GMS
Jury Trial Demanded

Plaintiff's First Amendment To Claims For Relief And Injunction

Comes Now, the plaintiff Al-MuHAMMAD ALEK SHABAZZ, in pro se status, who by a grant from this Honorable Court on August 10, 2006, amends his civil action pursuant to 42 U.S.C. § 1983 as following:

Procedural History

1. The plaintiff is an incarcerated inmate at the Delaware Correctional Center, Smyrna, DE 19977.
2. First Correctional Medical Services, are the former contractual medical provider hired to facilitate and provide all medical care services for all state prisoner housed under the custody of Delaware Department of Corrections "DOC" Stanley W. Taylor (Commissioner) authority.
3. Correctional Medical Services, are currently employed by Mr. Taylor as the contractual medical provider hired to facilitate and provide all medical care services at Delaware Correctional Center, and state wide under which is ran by the Delaware Department of Corrections.

4. Thomas L. Carroll, is warden at the Delaware Correctional Center, Smyrna, De 19977.

5. I, THE PLAINTIFF (AL-MUSTAFA MEER SHAHBAZ) on March 22, 2006, fell and hit my head damaging my right ear while getting off my bunk in MHU #22. I immediately called for a guard because my ear was bleeding and had begun to swell also. Present as witnesses was inmates (Bryant Cannon and David Smith) who assisted me by applying a wet rag to my ear.

6. After a few minutes (Sgt. Herman and Cpl. B. Burton) arrived and called for a nurse. At which time (LN. Neal) came and looked at my ear, she then called for another nurse (Sherrell) who said that I might need stitches. Talking to (LN. Neal) by way of phone, and told her to bring me to the building infirmary room for examination.

7. After getting there (Sherrell) cleaned up the area and advised me again that it still might need stitches, but never gave to me any. She then told me to come back in a few days to be re-evaluated.

8. On March 22, 2006, (RN. Kay) gave me an antibiotic for my ear. And at 6:45 pm I was called out and had my ear checked by (LN. Reader) who informed me that it was still bleeding from the inside and was very discolored. Mrs. Reader further advised me that it was her professional opinion and experience that I should have been sent out when it happened.

9. On March 28, 2006, I hadn't experienced any change in my condition. The antibiotic wasn't working and not only was there still bleeding and discoloration to my ear. But I still was suffering in pain both emotionally and physically. I was able to contact my counselor, Mrs. Atallian who in exchange informed medical, who sent (NP. Sherrell out, MA. Adrienne Bianchi, MA. Cane) nothing was done.

9. Since first injuring myself (DCC/DCC) and its medical contractors have refused to provide me with adequate medical treatment. Despite now assessed doctor diagnosis for our medical treatment, nothing continues to get done, irrespective of medical grievances and written complaints to prison and medical officials.

CLAIMS FOR RELIEF

10. THE ACTIONS OF DEFENDANTS (STANLEY W. MAJOR, THOMAS L. CARROLL, ET AL) ACTING UNDER COLOR OF STATE LAW IN THEIR OFFICIAL AND INDIVIDUAL CAPACITIES WITH KNOWLEDGE AND ACQUAINTANCE OF THE DELIBERATE INDIFFERENCE TO MY SERIOUS MEDICAL NEEDS, CONSTITUTES "CRUEL AND UNUSUAL PUNISHMENT" IN VIOLATION OF THE EIGHTH AMENDMENT OF THE UNITED STATES CONSTITUTION. MONMOUTH COUNTY CORRECTIONAL CENTER & INSTITUTIONAL INMATES V. LANZARO, 834 F.2d 326, 347 (3d Cir. 1987) (A MEDICAL NEED IS SERIOUS IF IT IS ONE THAT HAS BEEN DIAGNOSED BY A PHYSICIAN AS REQUIRING TREATMENT OR ONE THAT OBVIOUSLY A LAY PERSON WOULD EASILY RECOGNIZED BY THE NECESSITY FOR A DOCTOR'S ATTENTION); ESTELLE V. GAMBLE, 429 U.S. 97, 104, 97 S.Ct. 285 (1976).

11. THE ACTIONS OF DEFENDANTS (FIRST CORRECTIONAL MEDICAL AND CORRECTIONAL MEDICAL SERVICES) ALONG WITH ITS NAMED AND UNNAMED HEREIN EMPLOYEES ACTING UNDER COLOR OF STATE LAW IN THEIR OFFICIAL AND INDIVIDUAL CAPACITIES WITH KNOWLEDGE AND ACQUAINTANCE OF DELIBERATE INDIFFERENCE TO MY SERIOUS MEDICAL NEEDS, HAVE DEMONSTRATED "CRUEL AND UNUSUAL PUNISHMENT" BY FAILING TO PROVIDE TO ME ADEQUATE MEDICAL TREATMENT IN VIOLATION OF THE EIGHTH AMENDMENT OF THE UNITED STATES CONSTITUTION. VINNEGE V. GIBBS, 520 F.2d 926 (4th Cir. 1975) (DENIAL OF MEDICAL CARE); WHITE V. NAPOLEON, 897 F.2d 103, 109 (3d Cir. 1990) (deliberate indifference claim stated by allegation that doctor(s) intended to inflict pain on prisoner without any medical justification and..... the sheer number of specific number of instances in which doctor(s) allegedly, insisted on course continuing treatment that doctor(s) knew was painful, ineffective, or entitled substantial risk of serious harm to prisoner) is intentional maltreatment; ESTELLE V. GAMBLE, 429 U.S. 97, 104, 97 S.Ct. 285 (1976)

RELIEF REQUESTED

WHEREFORE, THE PLAINTIFF REQUESTS THAT THE COURT GRANT THE FOLLOWING RELIEF:

A. Issue declaratory judgment stating that:

1. DEFENDANTS Taylor, Carroll, et al., working as employees of the Delaware Department of Corrections have violated the rights of the Plaintiff under the Eighth Amendment to the United States Constitution, that constitutes a deliberate indifference to his serious medical needs.

2. DEFENDANTS First Correctional Medical, Correctional Medical Services, and their employees have violated the rights of the Plaintiff under the Eighth Amendment to the United States Constitution, constituting a deliberate indifference to his serious medical needs.

B. ISSUE A INJUNCTION ORDERING THAT DEFENDANTS Taylor and Carroll or their agents to:

1. IMMEDIATELY ARRANGE AND PAY FOR THE PLAINTIFF TO BE SEEN BY A Ear Specialist (NOT AFFILIATED) WITH ANY OF THE DEFENDANTS IN THIS CASE.

2. IMMEDIATELY ARRANGE FOR THE PLAINTIFF TO BEGIN RECEIVING ADEQUATE PAIN MEDICATION FOR HIS EAR AND MEDICATIONS NEEDED FOR THE TREATMENT OF A BUSTED EAR DRUM.

3. IMMEDIATELY ISSUE AFTER REVIEW BY THE Ear Specialist their finding a report to this Court within 10 days of its ASSESSMENT FOR RE-EVALUATION AND/OR FORMS OF CONTINUOUS TREATMENT TO BE SERVED UPON THE PLAINTIFF. WHEREWHICH, THIS COURT SHALL MAKE AN ORDER TO DISCONTINUE OR CONTINUE THE NECESSARY FORMS OF EFFECTIVE TREATMENT TO THE PLAINTIFF.

C. AWARD COMPENSATORY DAMAGES IN THE FOLLOWING AMOUNTS:

1. \$25,000 SEVERALLY AGAINST DEFENDANTS First Correctional Medical and Correctional Medical Services, et al., for the emotional and physical injuries sustained as a result of the Plaintiff denial of medical care.

2. \$2,000 SEVERALLY AGAINST DEFENDANTS Taylor and Carroll, et al., for knowingly neglecting to provide the Plaintiff with the NECESSARY CARE AND TREATMENT DESERVING OF THE PLAINTIFF FOR HIS SERIOUS MEDICAL NEEDS, AT THE HANDS OF THEIR CONTRACTED MEDICAL PERSONNEL DELIBERATE INDIFFERENCE.

D. Award punitive damages in the following amounts:

1. \$10,000 each against individuals directly associated with the denial of the Plaintiff's medical treatment employed by First Correctional Medical or Correctional Medical Services, et al.

2. \$15,000 each against Defendants Taylor and Carroll, et al., for the continual neglect and failure to act to the serious medical needs of the Plaintiff.

E. Grant such other relief as may appear that Plaintiff is entitled to.

Dated: October 12, 2006

Ali-Muhammad Aleek Shabszz
Ali-Muhammad Aleek Shabszz #241936
Delaware Correctional Center
1181 Paddock Road, P.O. Box 200
Smyrna, Delaware 19977

Sund 10-6-06 11:15am Cb. J. Stanley ^{Wm} Cb. Mills ^{Wm} & Blm
 officer shook my cell & 40 & Darn Cb. Stanley and
 I don't get along all in the same taken his fair and
 covers his back and asked me what I pissed off
 because they told him to shake my cell down
 he let me know it wasn't his stuff so Stephanie
 Perry is also a part of this scheme and equation
 due to my allegations against Sgt. S. Lloyd on Tuesday
 Oct 3rd 06 10:30am I right before we were called
 for Ramadan up to the Chapel. Cb. Hall ^{Wm}
 in Chapel / Cb. T. Mills ^{Wm} & T. A. N. T. P. S/A shot Cb. T. Stanley ^{Wm}
 Cpl. S. Bane / He told me direct that it wasn't his stuff
 and whom it was!

Juvenile
Opel

10-7-06 Spoke to Cpt. Karl Hargard ^{Blm} today
 10-10-06 Lucinda and I had words, I told her you aren't going
 to be satisfied until you go to court, so she spoke real
 slick, and I told her not to plan herself. I am going
 to file a grievance on her as well, and a letter to
 her boss John, because he did nothing the first time when
 I had problems / 9:20am in the oldy Sgt. Lloyd ^{Blm} spoke
 real slick! I'm tired of these clown ass people. I am fed
 up!

Tuesday Oct 31st 06 Sgt Hedding was in charge of the Bldg I
 had to go to med somehow my med card came up missing
 after Sgt Steven Floyd I had a dispute the day before
 some of his co-workers said Sgt. Floyd disposed of my
 card, so I spoke to Nurse Lucinda Pals at the med
 window she said she would take care of it and speak to
 Floyd. 9:30am I was called to see Chaplin Frank
 Pennell. So I went to see him but I also had to
 see Counselor Kevin Stetcher from 10am to 11:30am
 we talked and some surprising crap came up
 on the Computer. 3 write-ups that are bogus, but
 the most surprising was the write up from Stephanie
 Perry after my visit 10-05-06 my people met with
 the Warden & I/A on assault charges against
 Sgt. D. Floyd They called Floyd up 1pm & that's
 when Perry wrote me up. Conflict of interest
 Both ways Today Nov. 2nd 06 she said medical
 didn't want me unless they call I told her
 I come up everyday at 9am she said she didn't
 see my card Floyd ripped it up. She said
 she's tired of being caught up in the middle
 of this war between her and I 9:30am Classification
 Lt. Porter^{with} Kevin Stetcher^{with} another counselor 10am
 Cpt K. Hazzard Investigating Conflict of Interest Evelyn
 Stevenson won't see any of my classifications

due to conflict of interest. B. H. Williams Jr They asked to hear
all write up A.S.A.P. Mon or Wednesday. Holiday
Tuesday.

11-03-06 6:17pm Clearance on Cpl. M. Burtan sent to Major
James Scarborough from Lisa M. Merson

11-06-06 3:15pm Saw Shana Clark ^{N/A} Suppose to be
able come get meds as ordered everyday
at 9am GPTWTF Shohida & sk mental health
Appt. tomorrow afternoon/

10-25-06

9:20am Lucinda Opels you tell me to have the Bldg to call about me picking my meds out. I told her that the Sgt S. Floyd and I don't get along like that. She said if you want your fuckin meds you'll have them call.

security Cpl. M. Burton ^{write} talking to Katherine Kaster about me
 Major Scarborough Instead of doing her security job, she's worrying about medical.

Manique Look my Blood pressure. It was 139/102

10-31-06

2:00pm Sgt S. Floyd pulls me off the tier Handcuffs and threatens me, and then ran some B/S story down to Lt. Silas before Silas took the Handcuffs off. Silas threaten to speak me if I got disordered and threatening which I never was. Floyd Blantly lied because there is a paper trail of Harassment and Assault on Cpt. Karl Daggard's desk, and I wrote it up to the Warden, but it looks as if I had to also take this to the Security Chief, because I picked up my 1st B/S Major from Floyd in over 3 yrs. I will be getting my people involved and the

senator's and everyone else as far as my lawyer
 And so forth/ This will not continue, and I'm
 going to make sure to press this issue to the
 fullest. I'm waiting on the preliminary hearing
 for the bogus write up. 2:42 pm.

10-25-06 When Steven Lloyd the Sgt tried to give me a ultimatum
 between me or wait or med. C/o Stephanie Kemp did a bogus
 write up because I pressed assault charges on Sgt Lloyd
 He was called up front to N's & by the Warden when
 this bogus write up took place. She's the same one
 that stood in between us, and told me to just walk
 away. She never advised or told me I was getting
 a write up for being assaulted/ It's all retaliation

10-31-06 Eweyden sat down with Caminda Kevin Stetson from
 10 am to 11:15 am about everything from vindictiveness/ Conflict of
 Interest so forth, and the open case write-up from the kitchen
 which everything is on medical file and I had to leave work
 Eweyden for pain med Vicodin, and Blood pressure Checks
 Medical treatments per Dr. John Rust/ 8-29-06
 Last write up open Bogus by Sgt S. Lloyd / Sgt
 Salas on Mondays Oct 30th 06 I had already sent
 letters & Assault Charges to Cpt Haggard & warned
 everyone this would happen.

Nathaniel Henry

Nathaniel Davis
6:15pm Hypoths def Reich / 9/10 Juss Lyons tied to him / higher up / Cpt. Bergards

84 Kitchen Managers Sheryl Morris

2. Journeys w/oms

S. Bayer works

Christine Alexa Baysinger w/k

Christine Gore

2. Poole B/G

S. Agnes B/C

Kathy Seamon ^{with James Hosp}

Lucinda Bk B/c

G. Dailor Pyon W/6400

C/o M. Strain & Co

Nurse Alex Washington American

Sharon ^{DL's}

Stephanie

Yasha

Crystal 6 1/2 yrs.

Jessica w/c v-

Shoma

5-1 Counselor (Minor)

Haemon sk

B. Pressley 1st / Sgt ^{sub} Kitchen

MAXWELL OR KESSIE CROSSER

DEAL BALLON

12:50pm
Tuesday Aug 29th
Suspended
with pay from
8-29-06 thru
No reason to be
suspended

12:47pm Kitchen Manager Sheryl Morris & Staff Sgt J. Ayres
said spoke to medical, but didn't tell me the
name of whom they spoke to they said I'm not
suppose to come up everyday. I got blood
pressure checks, and medical treatment & pain
meds for right ear that I still can not hear
out of. I have a pink card that I hapt to go
back to the Bldg to get. I'm going to file
medical grievance and suit for denial of treatment.
I don't know whom Sheryl spoke to, but they lied.
Wrote Deputy Warden Secretary Sue Walls & Cpt
J. Y. Henry & shift Commander. Warden T. Carroll.

I argued with Lucinda, and they pulled some dumb shit
and Lethy Seaton Head nurse Katherine! Sheryl told me I
couldn't leave at 1pm I'll straighten this out!

Ms. Crystal
Spoke to
Debra Washington
4:20pm
Before she
left Lucinda
shins

Spoke to Home
after spoke to Sheryl
I was give me a white
pass 1:30pm

Sgt Floyd and C/O Stephanie Perry
Tried to Intimidate me and
Insult my character! They said
Sheryl Morris terminated me / which

4:42pm back from medical
Spoke to Home in mental health
did report Son John with # of medical
Bldg 2pm C/O Headway signed a
pass I will be forwarding everything to
and I will

(Chenina CARE)

**DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER**

This request is for (circle one): MEDICAL DENTAL MENTAL HEALTH
alias me. ROGER DENNIS JR.

Al-Muhammad Aleek Shabazz

2-Bldg 1 D #40

Name (Print)

Housing Location

April 13th

00241736

Aug. 12th 06

Date of Birth

SBI Number

Date Submitted

Complaint (What type of problem are you having)? PAIN Med v. kativ is About
to run out for Right EAR. Dr. J. Duest said it will continue
until I go out to ENT Specialist. EAR continues to
DRAIN. SHARP PAINS IN Stomach lower left side near abdominal area
PELVIS AREA. N/A 2 KG DONE and CONTINUOUS with weekly blood pressure check

Al-Muhammad Aleek Shabazz

8-12-06

Inmate Signature

Date

The below area is for medical use only. Please do not write any further.

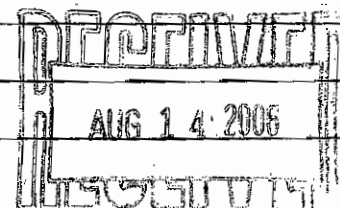
S: Your medication has been renewed & you
are scheduled to be seen. KJ 8-15-06

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

A:

P:

E:



Provider Signature & Title

Date & Time

DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER

This request is for (circle one): MEDICAL DENTAL MENTAL HEALTH

A.K.A. Roger D. Dwyer

Al-Muhammad Alok Shabazz

Name (Print)

E-Bldg Dtier

Housing Location

April 13th

Date of Birth

00241736

SBI Number

9-5th 06

Date Submitted

Complaint (What type of problem are you having)? Seizures pains in the stomach, blood-
pressures been running high, ear still draining light ear serious
migraine headaches, blurred vision, plus I need Dr. J. Dunt to straighten
Blood pressure Checks out been having hard time breathing, and catching breath
due to Asthma Bronchial. V. active medics turned soon need extended order and

medical Card.

Al-Muhammad Alok Shabazz aka Roger Dwyer

Inmate Signature

9-5-06

Date

The below area is for medical use only. Please do not write any further.

S: The Dr. has seen you 2 times in the
past month) - you explained to
me in person on 8-30-06 that

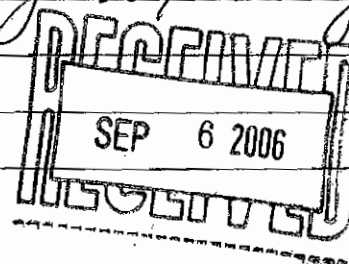
O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

you were anxious over losing
your job. Anxiety can cause

A: all of the symptoms you are
experiencing above. Medical can
only verify that your B/P

P: Checks are ordered for security -
we can not change their decision
about your job. your inhaler
order is still good - you may
come to pharmacy

E: rounds between
1:00 p.m. & 2:30 p.m.



Provider Signature & Title

Date & Time

DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER

This request is for (circle one): MEDICAL DENTAL MENTAL HEALTH

AKA M. R. R. R. R. R.

Al-Muhammad A. A. A. A.
Name (Print)

E. B. B. B. B.
Housing Location

April 13th
Date of Birth

00041736
SBI Number

Sept 7th 06
Date Submitted

I didn't ask for your opinion, I requested to see Dr. Durst as I was supposed to have been
Complaint (What type of problem are you having)? scheduled 2 1/2 weeks ago.

Again I am having severe stomach
pains which I've been scheduled for a sonogram, my ear I think is still infected right
ear draining that I'm totally deaf in, vibration makes painmed for ear is about to
burst, I'm having a hard time catching my breath from asthma bronchial, and
my blood pressures been running high. I don't have anything to do with my job right now.
I'll deal with that accordingly. That's not your business. My health is. Dr. Durst called a

back brace I still don't
have yet.

Al-Muhammad A. A. A. A.
Inmate Signature

9-7-06
Date

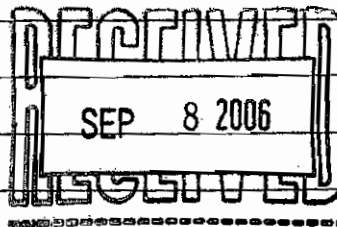
The below area is for medical use only. Please do not write any further.

S: you are scheduled to see a nurse
practioner. Dr. Durst has not
been available recently, not sure

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ Wt: _____

when he is returning. if your
shortness of breath is not resolved
A: with use of your inhaler, then
please notify security so you can
be see for an urgent sick call.
P: AK 9-8-06

E:




Provider Signature & Title

Date & Time

Disciplinary#
1025741DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

Date: 07/02/2006

DISCIPLINARY REPORT

Disciplinary Type: <u>Class 1</u>		Housing Unit <u>Bldg C</u>		IR#: <u>1033553</u>	
SBI#	Inmate Name	Inst. Name	Location Of Incident	Date	Time
00241736	Dennis, Roger L	DCC	Bldg.14 Chow Hall A	06/29/2006	11:50
Violations: <u>1.06/200.203 Disorderly or Threatening Behavior, 2.06/200.108 Failing to Obey an Order, 2.10/200.213 Lying</u>					
Witnesses: <u>1. N/A</u>		<u>2. N/A</u>		<u>3. N/A</u>	
Description of Alleged Violation(s)					
<p>On June 29, 2006 At Approx. 1150 Hours I, Lt. Paul Harvey Ordered I/M Roger Dennis To Sit At A Specific Table Which Still Had Two Empty Seats As He Was Attempting To Pass By The Table To Sit At An Empty Table. I/M Dennis Responded By Informing Me That Someone Had Spilled Water On The Table. I Observed The Table Which Did Have Water Spilled At One Of The Empty Spaces. I Ordered I/M Dennis To Sit In The Dry Seat Where There Was No Water On The Table In Front Of That Seat. I/M Dennis Responded "You Want Me To Sit There?", Pointed To The Dry Seat, And I Said "Yes, It'S Not Wet There." And Nodded My Head In An Up And Downward Motion To Say Yes. I/M Dennis Then Proceeded To Bypass The Table And Sit At Another Table When I Turned My Back. After I/M Dennis Exited The Dinning Hall He Approached Me And Said That He Did Not Hear Me Tell Him To Sit At The Table Where One Of The Seats Were Wet Because He Has Trouble Hearing Out Of One Of His Ears. I Then Explained To Him That He Had Even Responded To Me And A Brief Conversation Occurred. I/M Dennis Began To Argue The Issue With Me And I Ordered Him To Return To His Housing Unit With The Rest Of The Inmates Who Were Already Standing At Sp 20 Gate Waiting To Go Back To T1 And T2 Bldgs. I/M Dennis Then Yelled "That Aint Right And You Can Bet Major Holman Will Find Out About This". I Then Informed I/M Dennis That That He Would Be Receiving A Write-Up.</p>					
Reporting Officer: <u>Harvey, Paul (Staff Lt./Lt)</u>					
Immediate Action Taken					
Immediate action taken by: <u>Harvey, Paul -Staff Lt./Lt</u>					
Referred I/M Roger Dennis To The Major Adjustment Board					
Offender Disposition Details					
Disposition: <u>N/A</u>		Date: <u>N/A</u>		Time: <u>N/A</u>	
Cell secured? <u>No</u>					
Reason: <u>N/A</u>					
Disposition Of Evidence: <u>N/A</u>					
Approval Information					
Approved: <input checked="" type="checkbox"/> Disapproved: <input type="checkbox"/> Approved By: <u>Burman, Barry M (Staff Lt./Lt)</u>					
Comments: <u>N/A</u>					
Shift Supervisor Details					
Date Received:		Time:		Received From: <u>Burman, Barry M</u>	
Shift Supervisor Determination:					
<input type="checkbox"/> Upon reviewing this Disciplinary Report, I conclude that the offense may be properly responded to by an immediate revocation of the following privileges(see reverse side) for _____ hours not to exceed 24 hours)					
<input type="checkbox"/> Upon reviewing this Disciplinary Report, I conclude that the offense would be properly responded to by Disciplinary Hearing.					
 Burman, Barry M (Staff Lt./Lt)					

Disciplinary#
1025741

DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

Date: 07/02/2006

DISCIPLINARY REPORT

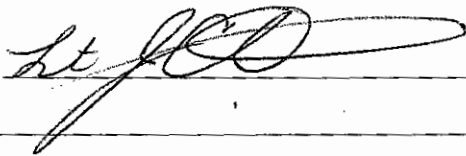
Disciplinary Type: Class1

Housing Unit Bldg C

IR#: 1033553

I have received a copy of this notice on DATE: 7-2-06 TIME: 2253 and have been informed of my rights to have a hearing and to present evidence on my own behalf. I understand, if found guilty, I will be subject to imposition of sanctions outlined in the Rules of conduct.

Preliminary Hearing
Officer:



Offender:

Dennis, Roger L

07/02/2006
1025741

DCC Delaware Correctional Center

Date: 07/02/2006

Smyrna Landing Road

SMYRNA DE, 19977

Phone#: 302-653-9261

NOTICE OF DISCIPLINARY HEARING - FOR MINOR/MAJOR OFFENSE

TO: Inmate: Dennis, Roger L

SBI#: 00241736

Housing Unit: Bldg C

1. You will be scheduled to appear before the Hearing Office to answer charges pending against you. (Staff are to explain the charges as listed on the 122.)
2. At that time, a hearing will be held to determine whether you violated Institutional Rule(s) as alleged in the attached Disciplinary Report.
How do you plead ? ☐ Guilty ☒ Not Guilty
3. A "Minor Offense" is a rule violation in which the extent of the sanction to be imposed shall be restricted to:
 - a. Written Reprimand
 - b. Loss of one or more privileges for a period of time of more than 24 hours but not to exceed 15 days.
4. A "Major Offense" is a rule violation in which the extent of the sanction to be imposed shall be restricted to:
 - a. Loss of one or more privileges for a period of time not to exceed 90 days.
 - b. Confinement to assigned quarters for a period of time not to exceed 90 days.
 - c. Isolation confinement for a period of time not to exceed 90 days.
 - d. Loss of good time for a period of time not to exceed 90 days.
(Forfeiture of accumulated good time shall be subject to the approval of the Commissioner or his designee.)
5. You have the right in the disciplinary process as stated on the lower and back of this page.
These have been fully explained to you at the time of this notification.
6. Counsel requested No Name of Counsel: _____
7. Confront accuser? Yes
8. Witness requested? No Name of Witness: _____

I certify that on 07/02/2006 at 20:27 , I
served upon the above inmate this notice of
Disciplinary Hearing for Minor/Major Offense and
the Disciplinary Report is attached hereto.

I have received copies of 122 & 127 and
understand my rights as Form # 127 has
been read to me


(Employee's Signature & Title)

Burman, Barry M.

(Inmate's Signature)

Dennis, Roger L

07/02/2006
1025741

DCC Delaware Correctional Center

Date: 07/02/2006

Smyrna Landing Road

SMYRNA DE, 19977

Phone#: 302-653-9261

NOTICE OF DISCIPLINARY HEARING - FOR MINOR/MAJOR OFFENSE

INMATE RIGHTS IN THE DISCIPLINARY PROCESS

MINOR OFFENSE :

Right to Remain Silent: If you are charged criminally based upon the same facts giving rise to the disciplinary process, you have the right to remain silent at the Disciplinary Hearing. If you choose to remain silent, your silence will not be considered against you at the Disciplinary Hearing. In all other circumstances, silence at the Disciplinary Hearing may be considered against you.

Presence: You have the right to be present at all phases of the hearing, except that you may be excluded during the Hearing Officer's deliberations and at any time your behavior becomes disruptive to the proceedings. Reason for such exclusions shall be stated in writing.

DR # 102
5741Date: 7-14-06DCC Delaware Correctional Center
1181 Paddock Road
Smyrna, DE 19977**DISCIPLINARY HEARING DECISION**☒ Class I (Major) ☐ Class II (Minor) ☐ Summary (24 Hour LOAP)Inmate: Dennis, Roger L. SBI#: 00 - 241736
Institution: Delaware Correctional Center Hearing Date: 5/14 Time: 0935Inmate Present: ☒ Yes ☐ No

Reason (If No): _____

Violation: d + t bel - 1100 - by

Inmate Plea: _____

Inmate Statement: offender state he never yelled or threatened Lt. He does have trouble hearing out of one of his ear. The sit was well was area. offender (allied) state he was not notified theWitness Name: later all. white up.

Testimony: _____

Witness Name: None

Testimony: _____

Witness Name: "

Testimony: _____

Decision: ☐ Guilty ☒ Not Guilty ☐ Further InvestigationRational: Based on report possibly does not accuse did not hear accusation. He note accused did not communicate with convicted accuse.Sanctions: NoneHearing Officer's Signature 5/17 R.H. Williams

I understand that I may appeal the decision of the Hearing Officer (or Shift Supervisor in the case of a Summary Sanction) to the Commissioner of Correction or his designee. I must complete a Disciplinary Appeal Form within 72 hours immediately following the hearing and mail it to the DCC Hearing Office.

☐ I do intend to appeal.☒ I do not intend to appeal.X Al-Muhammad G. Shalaby (L. Dennis Jr)

Inmate's Signature

ORDER TO IMPLEMENT SANCTIONS☐ Inmate does not wish to appeal ☐ Appeal has been denied by Commissioner or Designee
☐ Sanctions have been modified ☐ Time Limit (72 hours since hearing) for appeal has expiredModifications: _____
It is hereby ordered to implement the sanctions or modified sanctions on Date: _____ Time: _____

June 7, 2006

Al-Muhammad Aleek Shabazz, 241736

22

BL11

I received your letter. I am sorry to hear about the deaths in your family. I am preparing a note now to have the Chaplain come and speak with you and see if he can give you a call. I also was in contact with Miss Monet and advised her that I would be doing a Chaplain referral.

The mental health meeting is tomorrow. Your case will be brought up about you seeing a specialist. I have already e-mailed it about the agenda.

I will keep you posted as new information arrives.

Cindy Atallian
Counselor - 22

AM A.S. Received
June 8th 07
4pm 12 shift

May 31, 2006

Al-Muhammad Aleek Shabazz, 241736

22

BL11

I returned from vacation last week and found three letters from you. Unfortunately, I had over 100 letters after being gone a week, so it is taking a little time to answer all of them. I will try to address your concerns.

Anytime I think S/Lt. Profaci can help with an issue, I try to copy her so that she may be able to help. There are some areas of concern where I just do not have any authority, and I appreciate her help.

I would not place much merit on hearsay. If I have a problem with an individual, I would tell that person or put it in writing or ask for extra staff. I do not know who is telling you stories but that is what it is – a story. I like to be professional with all of my clients, and I generally receive that respect back. That is how you have always been in your requests and dealings with me. I do not know where the rumor started, but do not worry about it because there is no merit in rumors.

I am sorry to hear that you have not been to the specialist yet.

I did send out some good news yesterday. You have been approved for medium, and you are on the list to move.

The Chaplain should be here today, so I will talk to him again about getting back with you.

I cannot complete an affidavit unless higher authority advises me to do so.

Medical may want to speak to Records about your name change as they would receive the official notice, and they could confirm whatever was needed.

Since you are going to the building to complete Family Problems, you will more than likely move faster than others just waiting to go to medium. It should not be long now.

Thank you, and if you have any other questions, don't hesitate to write.

Cindy Atallian
Counselor – 22

DELAWARE CORRECTIONAL CENTER --- MEMORANDUM

TO: Inmate Roger Dennis, SBI# 241 736, Housing Unit 22
 VIA: Counselor H. H. H. H. H.
 FROM: I.B.C.C.
 DATE: 5/16/00
 RE: Classification Results

Your M.D.T. has recommended you for the following: Med, Family Problems,
Academics, AOP, MH, Erow or K. Leha

The I.B.C.C.'s decision is to:

☒ Approve
☐ Not Approve
☐ Defer
☐ Recommend
☐ Not Recommend

RECEIVED

MAY 30 REC'D

Treatment Services

BECAUSE:

<input type="checkbox"/> Lack of program participation	<input type="checkbox"/> Time remaining on sentence
<input type="checkbox"/> Pending disciplinary action	<input type="checkbox"/> Prior failure under supervision
<input type="checkbox"/> Gradual phasing indicated	<input type="checkbox"/> Poor institutional adjustment
<input type="checkbox"/> Open charges	<input type="checkbox"/> Serious nature of offense
<input type="checkbox"/> Prior criminal history	
<input type="checkbox"/> Failure to follow your treatment plan in that you	

☐ You present a current and continuous danger to the safety of staff, other inmates, or the good order of the Institution. Explanation: _____

OTHER: Rev 11/00

ADDITIONAL COMMENTS:

☐ Develop/continue treatment plan with counselor

You will be expected to address the following: _____

**Delaware Department of Correction
Health Care Services Fee Sheet**

Inmate Name Jabazz Muhammad
AKA Dennis Rogers SBI # 241736
(Last, First MI)

Facility DCC Date 6/5/06

☐ Chargeable Visit \$4.00
☒ Non Chargeable Visit -0-
☐ Medication Handling Fee (\$2.00 X _____) \$ _____

Total Amount Charged To Inmate Account \$ 0

Health Care Staff Signature: KC

I CERTIFY BY MY SIGNATURE THAT I HAVE RECEIVED THE SERVICES DESCRIBED ABOVE.

Inmate Signature: [Signature] Date: 6/5/06

1) *Witness Signature: _____ Date: _____

2) *Witness Signature: _____ Date: _____

The fee for services rendered will be deducted from your inmate account even if the amount deducted generates a negative balance. Any funds received by you will first be applied to any negative balance. Any negative balance remaining on your account when you are released will remain active for three (3) years after the date of release. Should you return to Delaware Department of Correction as an inmate within that three (3) year period, the negative balance will be applied to your inmate account on your new commitment.

Distribution:

Original: Facility Business Office Posted/Entered by _____ Date _____
Copy: Inmate Medical Record (yellow)
Inmate (pink)

*Only needed if inmate refuses or is unable to sign.

FORM #: 621

Emergency Attn

FORM #585

MEDICAL GRIEVANCE

FACILITY: Dolan Corr. Center

DATE SUBMITTED: 5-5-06

INMATE'S NAME: Al-Muhammed Abook Shabazz (Roger Dennis Jr)

SBI#: 00241736

HOUSING UNIT: MHU Bldg 22 B-2-11

CASE #: 42503

SECTION #1

DATE & TIME OF MEDICAL INCIDENT: 10:13am

TYPE OF MEDICAL PROBLEM:

Nurse Shari Quanni Neal has a serious problem. The Technician was in the Medical Dept. with her when she said there is a discrepancy with my meds 1 week or so is unaccounted for. She said I'm going to have to start signing for my meds or I will no longer get KOP. The problem is she said this in a threatening manner. She said I got meds on my B-Day April 13th and 1 week of my meds all unaccounted for. I never got any meds on the 13th of April. She tried to call me a liar in my face. I'm muslim and I deserve the respect I give. Since she got this head nurse spot she's been out of control. She's about to find herself in court. As what I'm saying is she needs to do her job, and stop being judgemental of me. I'm not a child I'm a grown man. My counselor Mrs. Cindy A. Otallian has also

GRIEVANT'S SIGNATURE: Al-Muhammed Abook Shabazz

DATE: 5-5-06

alias MR. Roger Dennis Jr.

ACTION REQUESTED BY GRIEVANT:

That I get the respect I give, and also that I get my meds without a big hassle, and that this head nurse apologizes for her actions, and respects me as I respect her job position, and that her Boss Jereen investigates this matter thoroughly and comes up with a appropriate solution that works for all of us.

DATE RECEIVED BY MEDICAL UNIT: _____

RECEIVED

MAY 12 2006

NOTE: EMERGENCY MEDICAL CONDITIONS WILL TAKE PRIORITY. OTHERWISE, MEDICAL GRIEVANCES WILL BE ADDRESSED AT THE WEEKLY MEDICAL COMMITTEE MEETING.

Inmate Grievance Office

been notified of this issue with RN Quanni Neal. I don't know if it's a personal grudge or what. She's never been out of control like this before the Head Nurse spot. I know I'm not the only convict that has raised issues & grieved her, and I won't be the last. There's also been a problem with my name. My name Al-Muhammed Aleek Shabazz is legal by the Courts, and my alias is Mr. Roger Dennis Jr. Dob 4-13-69. This issue has also been raised before. Quanni told me if I don't put both names on sick calls I won't be seen, and that's a threat, and a violation of my rights and my first Amendment. Respect my name. It's been changed since 1987 for religious reasons. It's legal. Go to the SB's and Court data base, and see what they use.

Al-Muhammed A. Shabazz
A.K.A. Roger L. Dennis Jr.

Mar 5th 06

Clinton

My witness is Officer Passley

Instructions for Submitting a Regular Grievance

Inmates are required, per DOC Procedure 4.4 [Inmate Grievance Procedure] to attempt to resolve complaints prior to filing a regular grievance. Grievances are to be submitted within seven (7) days from the date of the occurrence or incident or within seven days after the inmate became aware of the incident. The grievance is to be placed in the grievance box located in each housing unit.

Only one issue per grievance form will be addressed. If the grievance is submitted on a weekend or a holiday, it will be received during the next working day.

Return of Unprocessed Grievance

Intake Action: This Grievance Form is being returned to the inmate under the provisions outlined in DOV Procedure 4.4 "Inmate Grievance Procedure" for the following reason(s) :

☐ **Vulgar/Abusive or Threatening Language.** The Language that is unacceptable has been highlighted. The grievance may be resubmitted omitting this language.

☐ **Non-Grievable.** This issue has been defined as non-grievable in accordance with DOC Policy 4.4. These procedures have their own appeal process that must be followed.

☐ **Disciplinary Action**

☐ **Parole Decision**

☐ **Classification Action**

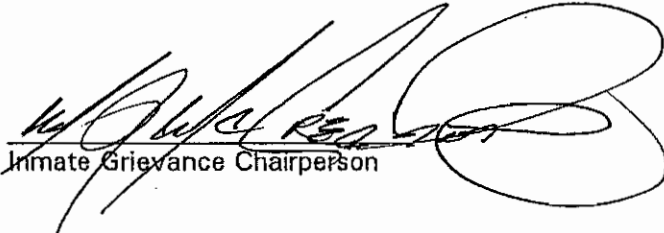
☐ **Request.** Requests are not processed through the grievance procedure. Please correspond with the appropriate Office to secure the information that is requested.

☐ **Duplicate Grievance(s).** This issue has been addressed previously in Grievance # _____.

☐ **Original Grievances must be submitted to the Inmate Grievance Chairperson.** Photocopies are not accepted.

☐ **Inquiry on behalf of other inmates.** Inmates cannot submit grievances for other inmates.

☒ **Expired Filing period.** Grievance exceeds seven (7) days from date of occurrence.


Inmate Grievance Chairperson

5-27-06
Date

10 § 6102

CONDEMNATION

10 § 6102

Department of Correction. Such individuals may only effect a name change by petitioning the Court of Common Pleas as follows:

(1) Individuals subject to the supervision of the Department of Correction shall be prohibited from adopting any names other than their legal names or otherwise effecting name changes, except as provided in this subsection.

(2) When, based upon testimony or sworn affidavits, the court finds that a petition for a name change of an individual subject to the supervision of the Department of Correction is motivated by a sincerely held religious belief, the court may grant such petition. In any case in which an individual subject to the supervision of the Department of Correction petitions the Court of Common Pleas for a change of name, the Court shall provide notice and opportunity to oppose the name change to the Department of Correction and shall permit it to submit any appropriate documentation in support of its opposition.

(3) If an individual is granted a name change pursuant to paragraph 2 of this subsection, he or she must provide all names previously held or adopted, as well as his or her legal name when signing any legal document or providing information to a law enforcement officer.

~~(4) The granting of any name changes pursuant to this subsection shall not restrict the Department of Correction from maintaining institutional files or otherwise referring to individuals by the names under which they became subject to the Department's supervision. (27 Del. Laws, c. 264, § 1; Code 1915, § 4657; Code 1935, § 5115; 10 Del. C. 1953, § 5901; 59 Del. Laws, c. 512, § 1; 67 Del. Laws, c. 103, § 1; 70 Del. Laws, c. 479, § 1.)~~

Cross references. — As to petition for change of name, see Civil Rule 81 of the Court of Common Pleas.

Revisor's note. — Chapter 15 of Title 13 was revised by 59 Del. Laws, c. 350. By this revision, jurisdiction over all actions for divorce is in the Family Court. Further, for present provisions similar to former §§ 1504 and 1536 of Title 13, referred to in this section, see §§ 1511 and 1514 of Title 13.

Effect of amendments. — 59 Del. Laws, c. 512, effective July 22, 1974, divided the former

section into two sentences by substituting a period and "The petition shall set" for "setting" at the beginning of the second sentence, substituted "Court of Common Pleas' Court" in the first sentence, and a sentence.

67 Del. Laws, c. 103, effective rewrote the last sentence.

70 Del. Laws, c. 479, effective added the (a) and (b) subsection; added (c); and made stylistic ch

CHAPTER 61. CONDEMNATION

Sec.

6111. Costs.

6114. Deposit of award.

§ 6102. Jurisdiction of Superior Court; filing of c

Application to inverse condemnation. — General principles of statutory construction suggest that had the General Assembly intended that inverse condemnation actions be included within the statutory scheme of condemnation, it would have so provided.

Delmarva Power & Light Co. v. Del. Super. Ct., 523 A.2d 973 (

For venue purposes, inverse condemnation and condemnation are separate entities. The lack of a venue statute specifically covering inverse condemnation requires examination of

DEANIS, ROGER

GRIEVANCE FORM

RECEIVED

AUG 30 2006

GC Warden's Office

DCC Warden's Office

BRIEFLY STATE THE REASON FOR THIS GRIEVANCE. GIVE DATES AND NAMES OF OTHERS INVOLVED IN THE INCIDENT OR ANY WITNESSES.

Kitchen Manager Sheryl Morris suspended me from Main Kitchen because she said I lied about my medical treatment everyday at 1pm, but its on record and signatures of nurses or Diet that I've been seen by for blood pressure treatments, and everyday meds that I have to take for pain due to being totally deaf at this time in my right ear & a blood clot & swelling and drainage. She tried to deny me of going to medical, so I went to the next level, and spoke to Kline whom is over top her in the kitchen. Inmates & Lt. Seahman told Sheryl I went above her and was talking to Kline but she can't write me up for anything nor terminate me, because I followed the Chain of Command.

ACTION REQUESTED BY GRIEVANT: That I be able to obtain another job without any delays and that this won't hinder me due to her unprofessional behavior and conduct and that she is dealt with by her superiors beings I can't request action against her.

GRIEVANT'S SIGNATURE: Al-Muhammad G. Shabazz DATE: 8-29-06

E: Al-Muhammad A. Shabazz
alias Roger Dennis Jr.

WAS AN INFORMAL RESOLUTION ACCEPTED? _____(YES) _____(NO)

(COMPLETE ONLY IF RESOLVED PRIOR TO HEARING)

GRIEVANT'S SIGNATURE: _____ DATE: _____

IF UNRESOLVED, YOU ARE ENTITLED TO A HEARING BY THE RESIDENT GRIEVANCE COMMITTEE.

RECEIVED

SEP 11 2006

April '97 REV

Inmate Grievance Office

Curran

Instructions for Submitting a Regular Grievance

Inmates are required, per DOC Procedure 4.4 [Inmate Grievance Procedure] to attempt to resolve complaints prior to filing a regular grievance. Grievances are to be submitted within seven(7) days from the date of the occurrence or incident or within seven days after the inmate became aware of the incident. The grievance is to be placed in the grievance box located in each housing unit.

Only one issue per grievance form will be addressed. If the grievance is submitted on a weekend or a holiday, it will be received during the next working day.

Curran

Return of Unprocessed Grievance

Intake Action: This Grievance Form is being returned to the inmate under the provisions outlined in DOC Procedure 4.4 "Inmate Grievance Procedure" for the following reason(s):

 Vulgar/Abusive or Threatening Language. The language that is unacceptable has been highlighted. The grievance may be resubmitted omitting this language.

☒ **Non-Grievable.** This issue has been defined as non-grievable in accordance with DOC Policy 4.4. These procedures have their own appeal process that must be followed.

☒ Disciplinary Action ☐ Parole Decision
☐ Classification Action

1027052

 Request. Requests are not processed through the grievance procedure. Please correspond with the appropriate office to secure the information that is requested.

 Duplicate Grievance(s). This issue has been addressed previously in Grievance # .

 Original Grievances must be submitted to the Inmate Grievance Chairperson. Photocopies are not accepted.

 Inquiry on behalf of other inmates. Inmates cannot submit grievances for other inmates.

 Expired filing period. Grievance exceeds seven(7) days from date of occurrence.

[Signature]
Inmate Grievance Chairperson

9.27.06
Date

(Chronical Case Immediate)

DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER

This request is for (circle one): MEDICAL DENTAL MENTAL HEALTH

Alia & Mr. Roger Dennis

Al-Muhammad Alek Shabazz

E-Bldg D #40

Name (Print)

Housing Location

April 13th

00241736

11-12-06

Date of Birth

SBI Number

Date Submitted

Complaint (What type of problem are you having)? Migraine headaches, blurred vision, constant

Ear pain and drainage in the right ear, excruciating pain in the stomach.

Burns when I urinate, sinuses draining, coughing green mucus. Request

to be seen by Dr. VonDusen not a nurse practitioner. I requested

Not to be seen by Rhonda Chuko before. Also want to know about my

blood pressure checks.

lower back pain.

Al-Muhammad Alek Shabazz

11-12th 06

Inmate Signature

Date

The below area is for medical use only. Please do not write any further.

S: Already scheduled w/ MD/MLP. - gm

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

A:

P:

E:

Provider Signature & Title

Date & Time

286
287
Medical

285

(Emergency Action)

**DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER**

This request is for (circle one): MEDICAL DENTAL MENTAL HEALTH

AKA: Roger JENNIS JR

Al-Muhammad Alask Shabazz

E-Bldg D#40

Name (Print)

Housing Location

April 13th

00241936

11-17-06

Date of Birth

SBI Number

Date Submitted

Complaint (What type of problem are you having)? I've put 5 chemical sick call slips in about my ear & stomach & this recent rash on my arm that's irritated and obviously I'm being disrespected, because I haven't been put on the list nor seen for none of my problems. Request to see M.D. Kondrusem. Not NP Shema period

Al-Muhammad A. Shabazz

11-17th 06

Inmate Signature

aka Roger JENNIS JR

Date

The below area is for medical use only. Please do not write any further.

S: You are scheduled to see healthcare professional

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

A:

P:

E:

Provider Signature & Title

Date & Time

REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES

FACILITY: DELAWARE CORRECTIONAL CENTER

This request is for (circle one): MEDICAL DENTAL MENTAL HEALTH

A.K.A. Roger Dennis Jr.

Al-Muhammad Aleek Shabazz

E. Bldg D#40

Name (Print)

Housing Location

April 13th

00241736

9-18-06

Date of Birth

SBI Number

Date Submitted

Complaint (What type of problem are you having?)

Sinus are really acting up and out of control coughing up a lot of cold sore throat and migraine headaches seems to be worst, and stomach pains, my ear that I'm totally deaf in continues to drain and in serious pain. (Right ear) Plus my lower back is really in pain waiting on back brace also schedule to go out for ENT & Sonogram

Al-Muhammad Aleek Shabazz

9-18-06

Inmate Signature

A.K.A. Roger Dennis Jr.

Date

The below area is for medical use only. Please do not write any further.

S: Scheduled to nurse sick call

DR

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

A:

P:

E:

Provider Signature & Title

Date & Time

3/1/99 DE01

FORM#:

MED

263

(Emergency Attn)

**DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER**

This request is for (circle one): MEDICAL DENTAL MENTAL HEALTH

A.K.A. MR. ROBERT L. DENNIS JR

Al-Muhammad Alsek Shak EE

E-Bldg D#40

Name (Print)
April 13th 69

Date of Birth

22841736

SBI Number

Housing Location

10-84065

Date Submitted

Complaint (What type of problem are you having)?

I need to see Henry
Mental Health Counselor. Need to talk to
you personally. Can't be discussed with
anyone else.

Al-Muhammad Alsek Shak EE

Inmate Signature

aka Robert Dennis Jr

10-24-06

Date

The below area is for medical use only. Please do not write any further.

S: Scheduled 10-27-06 08:00

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

A:

P:

E:

Provider Signature & Title

Date & Time

(Emergency Attn)

**DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER**

This request is for (circle one): MEDICAL DENTAL MENTAL HEALTH

AKA MR. ROGER DANNISSE

Al-Muhammad Alask Shabazz

Name (Print)

Bldg D#40

Housing Location

April 13th

Date of Birth

00241736

SBI Number

11-03-06

Date Submitted

RECEIVED
NOV 07 2006

Complaint (What type of problem are you having)? Emergency attn to Mental Health
Mr. Dennis. I need to see you. It is an extreme Emergency. It can
not wait. Life & death situation. Please schedule me immediately.

Al-Muhammad Alask Shabazz

Inmate Signature

aka Roger Dennis

11-03-06

Date

The below area is for medical use only. Please do not write any further.

S: Scheduled 11-08-06 1300

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

A:

P:

E:

Provider Signature & Title

Date & Time

DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER

This request is for (circle one): MEDICAL DENTAL MENTAL HEALTH

A.K.A. Robert Dennis SSR

Al-Muhammed Abock Shabazz

Name (Print)

E-Bldg D#40

Housing Location

April 13th

Date of Birth

00 24 17 36

SBI Number

11-03-06

Date Submitted

Complaint (What type of problem are you having)? Worst of pain in the stomach, and in the right ear still draining, and sinuses getting worse. Constant migraine headaches, blurry vision, and Dr. Van Dusen ordered constant blood pressure checks as needed, and the 3 times that's happened it's been real high, but it hasn't been done since, because I've been having trouble with staff members, medical saying I'm not suppose to be up there or have to be there, when my medical file says different. Cont on white paper

Al-Muhammed Abock Shabazz 11-03-06
 Inmate Signature aka Robert Dennis Jr Date

The below area is for medical use only. Please do not write any further.

S: You have been scheduled with provider.

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

A:

P:

E:

Provider Signature & Title

Date & Time

3/1/99 DE01

FORM#:

MED

263

FORM #584

GRIEVANCE FORM

FACILITY: Salina County Center DATE: 11-07-06

GRIEVANT'S NAME: Al-Muhammed Al-Qaak Shalaby SBI#: 00241736
AKA Kamil Al-Muhammed

CASE#: 83023 TIME OF INCIDENT: 8:50 AM

HOUSING UNIT: E-Bldg 2#46

BRIEFLY STATE THE REASON FOR THIS GRIEVANCE. GIVE DATES AND NAMES OF OTHERS INVOLVED IN THE INCIDENT OR ANY WITNESSES.

At 8:50am ~~let~~ ^{let} Slade was at the desk again he asked me where was I going, and I said to meds he told me I wasn't going anywhere got out his office, so I called Stephanie Perry to verify she straightened this out that I go get meds everyday at 9am, and he meaning ~~let~~ ^{let} Slade told her I ain't going no-where as long as he runs the Bldg. She showed him the list and everything he said that didn't mean anything that N. Vandusen said I don't come over unless called for - which he was misinformed, so he called Nurse Lucinda Opels while I was out in the yard and then he called me, and sent me over, because she told him I get meds everyday. I missed meds 3 days in a row because of his harassment & retaliation. He can not come between my emergency medical situation. He's no nurse Dr and he has no medical degrees.

ACTION REQUESTED BY GRIEVANT: That this is dealt with by Cpt. Paul Hazard
and Security Chief Major J. Scarborough, and Deputy Warden David
Pierce, because this medical memo was to get made instead of passed
was done by Pierce. Only diabetics get cards. Immediate and appropriate
action taken by his superiors, and if a crime has him under investigation
on a assault charge pressed by me.

GRIEVANT'S SIGNATURE: Al-Muhammad Aleek Shabazz DATE: 11-07-06
aka. Roger Dennis Jr

WAS AN INFORMAL RESOLUTION ACCEPTED? _____ (YES) _____ (NO)

(COMPLETE ONLY IF RESOLVED PRIOR TO HEARING)

GRIEVANT'S SIGNATURE: _____ DATE: _____

IF UNRESOLVED, YOU ARE ENTITLED TO A HEARING BY THE RESIDENT GRIEVANCE COMMITTEE.

**cc: INSTITUTION FILE
GRIEVANT**

RECEIVED

NOV 13 2006

April '97 REV

Inmate Grievance Office

Instructions for Submitting a Regular Grievance

Inmates are required, per DOC Procedure 4.4 [Inmate Grievance Procedure] to attempt to resolve complaints prior to filing a regular grievance. Grievances are to be submitted within seven(7) days from the date of the occurrence or incident or within seven days after the inmate became aware of the incident. The grievance is to be placed in the grievance box located in each housing unit.

Only one issue per grievance form will be addressed. If the grievance is submitted on a weekend or a holiday, it will be received during the next working day.

Return of Unprocessed Grievance

Intake Action: This Grievance Form is being returned to the inmate under the provisions outlined in DOC Procedure 4.4 "Inmate Grievance Procedure" for the following reason(s):

_____ **Vulgar/Abusive or Threatening Language.** The language that is unacceptable has been highlighted. The grievance may be resubmitted omitting this language.

_____ **Non-Grievable.** This issue has been defined as non-grievable in accordance with DOC Policy 4.4. These procedures have their own appeal process that must be followed. _____ Disciplinary Action _____ Parole Decision
_____ Classification Action

_____ **Request.** Requests are not processed through the grievance procedure. Please correspond with the appropriate office to secure the information that is requested.

_____ **Duplicate Grievance(s).** This issue has been addressed previously in Grievance # _____.

_____ **Original Grievances must be submitted to the Inmate Grievance Chairperson.** Photocopies are not accepted.

_____ **Inquiry on behalf of other inmates.** Inmates cannot submit grievances for other inmates.

_____ **Expired filing period.** Grievance exceeds seven(7) days from date of occurrence.

THIS CANNOT REQUEST DISCIPLINARY ACTION AGAINST STAFF.

[Signature]
Inmate Grievance Chairperson

11-25-06
Date

[Handwritten: INF]
[Handwritten: #1]

[Handwritten: JMT UT 10/1]

Emergency grievance against Sgt Steven Skoda

FORM #584

ROGER DENNIS

GRIEVANCE FORM

FACILITY: Dela Cour CenterDATE: 11-06-06GRIEVANT'S NAME: Al-Muhammed Alcock ShabazzSBI#: 0024173CASE#: 83008TIME OF INCIDENT: 8:55amHOUSING UNIT: E-Bldg D#40

BRIEFLY STATE THE REASON FOR THIS GRIEVANCE. GIVE DATES AND NAMES OF OTHERS INVOLVED IN THE INCIDENT OR ANY WITNESSES.

At 8:55am I called Hospital, Kitchen Workers, so forth & went out to get my pass because I get meds everyday at 9AM. Sgt Jones is running the Bldg but Sgt Steven Skoda asked me what was I going I said to get meds like I do everyday he said you are not on the list sir have a good day; I didn't argue I'm filing this paperwork as I was told to do. I don't use a med card anymore, because Deputy Warden David Peice said their only for Disruptives; as we are on a EZ-Pass list off the Computer put out less medical. This still is irritating and harassing me. I'm not going to argue with him I'm going to keep this paperwork on him. He said I'm on the list for 1pm & 2pm today. I'll straighten it then also. The nurses don't call for you.

ACTION REQUESTED BY GRIEVANT: Shut Cpt Karl Haggard our area. Cpt deals with this problem a.s.a.p. and takes the appropriate action against this officer for violating my rights to get pain meds that I need for my health and that the Security Chief/Major James Scarborough is made aware of the problem and Deputy Warden David Peice.

GRIEVANT'S SIGNATURE: Al-Muhammed A Shabazz
aka Roger DennisDATE: 11-06-06

WAS AN INFORMAL RESOLUTION ACCEPTED? _____ (YES) _____ (NO)

(COMPLETE ONLY IF RESOLVED PRIOR TO HEARING)

GRIEVANT'S SIGNATURE: _____

DATE: _____

IF UNRESOLVED, YOU ARE ENTITLED TO A HEARING BY THE RESIDENT GRIEVANCE COMMITTEE.

cc: INSTITUTION FILE
GRIEVANT

RECEIVED

April '97 REV

NOV 13 2006

Inmate Grievance Office

Instructions for Submitting a Regular Grievance

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Non-Grievable. This issue has been defined as non-grievable in accordance with DOC Policy 4.4. These procedures have their own appeal process that must be followed. Disciplinary Action Parole Decision
Classification Action

Request. Requests are not processed through the grievance procedure. Please correspond with the appropriate office to secure the information that is requested.

Duplicate Grievance(s). This issue has been addressed previously in Grievance # _____

Original Grievances must be submitted to the Inmate Grievance Chairperson. Photocopies are not accepted.

Inquiry on behalf of other inmates. Inmates cannot submit grievances for other inmates.

Expired filing period. Grievance exceeds seven(7) days from date of occurrence.

YOU WERE NOT ON THE MEDICAL APPOINTMENT LIST UNTIL 1:00 PM


Inmate Grievance Chairperson

11-25-06
Date

MED PICK-UP

FOR 11-21-06

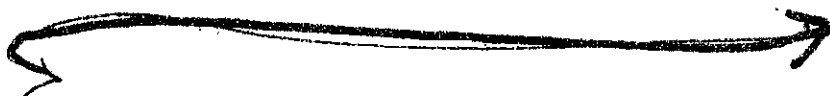
E

Cobb, Jeffrey
Borden, Thomas
Thompson, David
Folks, Joseph
Ducole, Gleny
Parker, Ronnie
Mulkey, Freddie
McCorrie, David
Pastino, Demetrius
Nicholson, Ronnie
Whalen, Frank
Workman, Corl
Bawlow, Rodney
Williamson, David
Houston, David
Cordero, Rogelio

Tell M. Williams 1pm WAS IN the window

Shabazz, Muhammad

Hardy, Lentford
Samuels, Reginald
McLabe, Donald
Watson, Arthur
Johnson, Bernard
Brown, Wifred
Kelly, Edward
Rodriguez, Juan
Reed, James
Stokes, Walter
Hassett, George
Cavello, Michael
~~Stiggen, Robert~~
Rampmeyer, Robert
Delhotel, David C
Roth, Richard



DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

Date: 01/25/2007

GRIEVANCE INFORMATION - MGC

OFFENDER GRIEVANCE INFORMATION

Offender Name : DENNIS, ROGER L	SBI# : 00241736	Institution : DCC
Grievance # : 85324	Grievance Date : 11/17/2006	Category : Individual
Status : Unresolved	Resolution Status:	Inmate Status :
Grievance Type: Health Issue (Medical)	Incident Date : 11/17/2006	Incident Time :
IGC : Merson, Lise M	Housing Location : Bldg 17, Lower, Tier C, Cell 7, Single	

MGC

Date Received : 12/08/2006

Date of Recommendation: 01/24/2007

GRIEVANCE COMMITTEE MEMBERS

Person Type	SBI #	Name	Vote
Staff		Eller, Gail	Uphold
Staff		Gordon, Oshenka	Uphold
Staff		Branch, Adriene	Uphold
Staff		McCreanor, Michael	Abstain

VOTE COUNT

Uphold : 3

Deny : 0

Abstain : 1

TIE BREAKER

Person Type	SBI #	Name	Vote
-------------	-------	------	------

RECOMMENDATION

Hearing held 24 January 2007.
 Uphold: Audio groin consult ordered 12/29/06.
 Saw hearing specialist Jan 23 07.
 Excedrin migraine order for Prn.
 Scheduled to see MD within 2 wks -
 MRC states he is already scheduled.
 Appeal provided. Appeal due 31 January 2007.



STATE OF DELAWARE
DEPARTMENT OF CORRECTION
OFFICE OF THE SECURITY SUPERINTENDENT
MAXIMUM & MEDIUM-HIGH SECURITY
DELAWARE CORRECTIONAL CENTER

1181 PADDOCK ROAD
SMYRNA, DELAWARE 19977
TELEPHONE: (302) 653-9261
FAX: (302) 659-6663

MEMORANDUM

TO: ^{Dennis}
I/M Roger ~~Davis~~ #241736
SHU 17

FROM: Major David K. Holman *DKH*

DATE: January 17, 2007

RE: Your Letter of 1/2/07

I am not clear about all of the issues you allege in your letter. S/Lt. Taylor is being tasked with assigning staff to interview you and reply to me with their findings.

DKH/cf

xc: S/Lt. Taylor
File

SAINT DISMAS CATHOLIC COMMUNITY

DELAWARE CORRECTIONAL CENTER

1181 PADDOCK ROAD

SMYRNA, DELAWARE 19977

2-17-07

Denn Roger -

I spoke with your mother regarding information about your father. She did not have it but promised to get some info and write you. She said she will send it as well.

Your aunt is not well - she is seriously ill and still in a hospital. She also stated that she would attempt to make an appointment for a visit. I hope she has time to fulfill those promises.

God Bless -

Father Jim

SAINT DISMAS CATHOLIC COMMUNITY
Delaware Correctional Center
1181 Paddock Road
Smyrna, Delaware 19777

4-28-07

DEAR ROGER —

Peace to you!

I spoke with your mother - she's been really busy lately. She tried to make a visit around your birthday but was unsuccessful.

She said your aunt is still on life support. There has been no great improvement.

Your cousin Dorene Clark is getting married on Sunday April 29 - so family will be going to that.

She, your mom, will do her best to contact you. I told her of your housing situation.

Your mother's new address is:

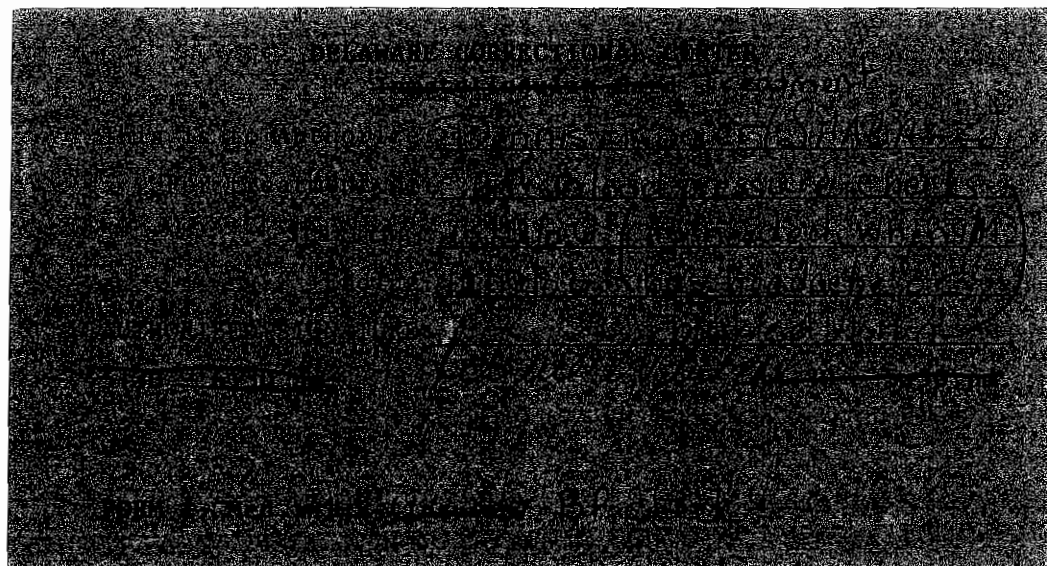
Glenn Dennis
919 Bennett Street
Wilm. DE 19801

I hope this helps.

God Bless —

Father Jim

302.653.9261 ext. 2487



negel
9am 139 / 102
Dues to
Shaniqua
10-25-06



Al Muhammad A, Shalabazz
AKA: Roger Dennis SBI 241736
E D T40
1181 Paddock Road
Smyrna, DE 19977

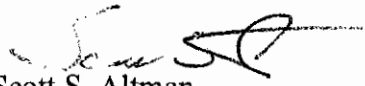
20 October 2006

Dear Mr. Shalabazz,

I received your letter regarding your concerns on 17 October 2006. Your record shows that the injury was sustained on 3/23/06. The treatment of dressing the wound on 3/23/ was appropriate. It is rare that someone experiences hearing loss following an injury like you sustained. You saw NP Ott on 4/23, 4/28, and /8/2006 for a condition called "*otitis externa*" which is an inflammation of the outer ear caused by an infection. The prescription of an antibiotic and pain medications for this condition is correct. Since you still complained of a hearing loss you were scheduled for an audiology (hearing specialist) evaluation, which was completed on 7/17/06. This evaluation showed no problems with the nerves in your ear so a recommendation was made to send you to an ear specialist, which is in progress. Due to the large number of requests for outside specialist this appointment can take up to 90 days to schedule. For security reasons we cannot notify you of the day and time of this appointment but if you do not receive information by 15 November 2006 please let me know so I can try to resolve this situation.

Please write to me if you experience any further problems.

Your Partner in Healthcare,


Scott S. Altman
Quality Assurance Monitor
Correctional Medical Services

CC: Warden Thomas Carroll



Al Muhammad A, Shalabazz
AKA: Roger Dennis SBI 241736
E D T40
1181 Paddock Road
Smyrna, DE 19977

24 November 2006

Dear Mr. Shalabazz,

I received your letter today. I apologize for the delays in your care but some contractual obligations have forced us to delay some procedures. These issues have been cleared and you are scheduled for an evaluation no later than 31 December 2006. I am not "putting you off", occasionally we have difficulty with our vendors but I have been assured that this issue has been cleared and you will be seen as required.

I appreciate the positive comments you gave to Mr Williams; providing care in any environment is difficult but can be more challenging in the environment you are in. I have discussed your concerns about the other staff members with our Director of Nursing and she is investigating these issues now.

The claim that we had not heard any of your grievances was troubling to me so I did investigate. I found that the Department of Corrections had deemed the following issues "non-grievable". Grievance # 79243, 79033, 72863, 55485, 54843, 45743, 42503, and 33000 were all stopped by the instillation grievance officer and never reported to the medical staff. The grievance process is under the control of the Department of Corrections and this is fully within their authority. I cannot comment on why they were denied; I did not receive them. The medical staff is ready to respond to any concerns voiced by our patients.

Please write to me if you experience any further problems.

Your Partner in Healthcare,

A handwritten signature in black ink, appearing to read "Scott S. Altman", is written over the typed name.

Scott S. Altman
Quality Assurance Monitor
Correctional Medical Services

CC: Warden Thomas Carroll

aclu delaware

August 24, 2006

Mr. Al-Muhammad Aleek Shabbaz
SBI# 241736
Delaware Correctional Center
1181 Paddock Road
Smyrna, DE 19977

Dear Mr. Shabazz:

I received your name from a couple of prisoners with whom I recently met when I was conducting interviews at DCC. They told me that you have had problems getting the health care you need. Currently, the American Civil Liberties Union of Delaware is in the initial stages of collecting and analyzing information from Delaware inmates who suffer from inadequately treated medical conditions, and we are conferring with colleagues about the feasibility of collective legal action or other forms of advocacy.

We are particularly interested in long-term inmates who, like yourself, believe they have received inadequate treatment for chronic conditions such as diabetes, staph infections, HIV/AIDS, cancer, hepatitis, and tuberculosis, among others.

We know that prisoners have great difficulty getting help and regret that we cannot provide you with *individual* direct representation. Because of the overwhelming demand for our services, we can only provide legal representation in cases that will help large groups of prisoners with very serious legal problems. Please understand that we have only one staff attorney in our office, and each month, we receive many letters from inmates throughout the state. Any one of these letters can describe an urgent legal need that would take months of a lawyer's time to resolve. That is why we are looking into the situation in Delaware prisons and considering a *class action* lawsuit.

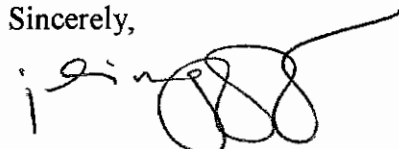
As you may know, a 1996 law called the **Prison Litigation Reform Act (PLRA)** makes it harder for prisoners to file lawsuits in federal court. One of the most significant hurdles to overcome in the PLRA is exhaustion of the prison's grievance procedure. For medical grievances in Delaware prisons, if you refuse to sign the informal resolution with the Inmate Grievance Chair, your appeal will go to a Medical Grievance Committee hearing. If you are unsatisfied with the result from the hearing, complete the MGC Appeal Statement section of Form #585. This will be forwarded to the Bureau Grievance Officer, who will forward a recommendation to the Bureau Chief for a final decision. You must complete all levels of appeal, *even if* prison staff tells you that your grievance is too late, or rejects your grievance for some other reason. If you file a lawsuit in federal court before using every step of your prison's grievance procedure, it will almost certainly be dismissed.

To determine whether your case is one that we can evaluate more closely, we need to see any grievances you have filed in relation to the lack of adequate care, as well as any appeals you have filed of denied or unresolved grievances. If you have these documents, please send them to me at your earliest convenience. **In your letter, please describe in detail your complaints about the inadequate provision of health care to you.**

Please understand that this is not an offer of representation. We are in the initial stages of collecting and analyzing information from inmates. We appreciate your patience as well as any other information you wish to share with us about the provision of health care in Delaware prisons.

Thank you for contacting the ACLU of Delaware. I look forward to your response.

Sincerely,

A handwritten signature in black ink, appearing to read 'Julia M. Graff', with a long, sweeping horizontal line extending to the right.

Julia M. Graff
Staff Attorney

Enclosure

aclu delaware

October 18, 2006

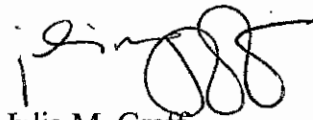
Mr. Al-Muhammad Aleek-Shabazz (a/k/a Roger Dennis, Jr.)
SBI# 241736
Delaware Correctional Center
1181 Paddock Road
Smyrna, DE 19977

Dear Mr. Aleek-Shabazz,

Thank you for your recent letter. I apologize for the delay in response. Please understand that I am the only staff attorney in the office, and I am currently corresponding with many, many dozens of inmates throughout the State, as well as handling several other matters, including litigation against the Department of Correction and Correctional Medical Services to obtain relevant health care-related documents so we can better determine how to proceed regarding the issue of inadequate care. Therefore, I may not be able to respond to every letter you send me, and turn around time is often 4-6 weeks. Please know that I am reading your letters and keeping track of the issues you raise in them. For this same reason, I am unable to arrange in person meetings with every person who writes to me.

Again, thank you for writing to the ACLU. I look forward to receiving updates on your health situation. Please let me know how your grievances progress, and send copies of any further grievances you file.

Sincerely,



Julia M. Graff
Staff Attorney

DCC Delaware Correctional Center
 Smyrna Landing Road
 SMYRNA DE, 19977
 Phone No. 302-653-9261

Date: 11/02/2006

GRIEVANCE REPORT**OFFENDER GRIEVANCE INFORMATION**

Offender Name : DENNIS, ROGER L	SBI# : 00241736	Institution : DCC
Grievance # : 77863	Grievance Date : 10/22/2006	Category : Individual
Status : Unresolved	Resolution Status :	Resol. Date :
Grievance Type: Staff Issues	Incident Date : 10/22/2006	Incident Time : 09:00
IGC : Merson, Lise M	Housing Location : Bldg E, Tier D, Cell 40, Bottom	

OFFENDER GRIEVANCE DETAILS

Description of Complaint: Inmate claims: Per my chart and Dr. Vondoozle my BP is checked once a week, but as needed when I have a headache & blurred vision, because of meds & chronicle care. Cpl. M. Burton which is there to provide security not teli the nurse what her job is and especially not to be in a confidential file. she's violated all the above, and this is a violation of my rights. She told the nurse whom took my BP not to sign her name on the care, because I'm not supposed to have them, But they are for my immediate treatment, and to let the Sgt. know that I'm excused to leave the bldg at these times or as needed. If I didn't have them Sgt. Floyd or other officers would not let me out. she threatened to get with D/W Pierce. Granted! I also have a court order about my treatments , and special orders from the doctor, because of my emergency health situation. I found out the nurses name is Emily , B/C, Reddish B/hair Jamaican Haitian ascent. this started because she's looking at old dates before I got this new medical order that says my next BP check would be Nov. 2nd 06.

Remedy Requested : That this is brought before the medical doctor & Medical director, and D/W Pierce, and Major Scarborough about his security officers whom are not minding their business and are in confidential medical situations, and he needs to be dealt with accordingly.

INDIVIDUALS INVOLVED

Type	SBI #	Name
------	-------	------

ADDITIONAL GRIEVANCE INFORMATION

Medical Grievance : NO	Date Received by Medical Unit :
Investigation Sent :	Investigation Sent To : Scarborough, James
Grievance Amount :	

DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

Date: 11/02/2006

INFORMAL RESOLUTION**OFFENDER GRIEVANCE INFORMATION**

Offender Name : DENNIS, ROGER L	SBI# : 00241736	Institution : DCC
Grievance # : 77863	Grievance Date : 10/22/2006	Category : Individual
Status : Unresolved	Resolution Status:	Inmate Status :
Grievance Type: Staff Issues	Incident Date : 10/22/2006	Incident Time : 09:00
IGC : Merson, Lise M	Housing Location :Bldg E, Tier D, Cell 40, Bottom	

INFORMAL RESOLUTION

Investigator Name : Scarborough, James

Date of Report 11/02/2006

Investigation Report :

Reason for Referring:

Offender's Signature: _____

Date : _____

Witness (Officer) : _____

Disciplinary#
1028179DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

Date: 10/30/2006

DISCIPLINARY REPORTDisciplinary Type: Class 1 Housing Unit Bldg E IR#: 1036745

SBI#	Inmate Name	Inst. Name	Location Of Incident	Date	Time
00241736	Dennis, Roger L	DCC	Bldg.E D Tier	10/30/2006	14:00

Violations: 1.06/200.203 Disorderly or Threatening Behavior, 2.01/200.105 Abuse of Privileges, 2.05 Disrespect, 2.06/200.108 Failing to Obey an Order, Disorderly behavior

Witnesses: 1. N/A2. N/A3. N/A**Description of Alleged Violation(s)**

On The Above And Time I Sgt Steven Floyd Was In The Office Running Chapel, Commissary And Receiving A Codo Green. Inmate Roger Dennis #241736 Came Into The Office And I (Floyd) Asked Inmate Dennis Where Was He Going And He Stated "Chapel". I informed Inmate Dennis That He Wasn'T On The Chapel List And Couldn'T Go Because Of This. Inmate Dennis Became Loud And Stated That " I Can Go To Chapel Anytime I Want Because I'M On All The List!"

At That Time I (Floyd) Checked The Roster For Chapel That I Had And Showed The Inmate That His Name Wasn'T On The List. I Then Proceeded To Put Inmate Dennis Back On D Tier And He Became Loud And Aggressive Stating That "You Motherfucker You Will Be Moved Soon Because I Already Talked To Capt. Hazzard And The Warden And You Got A Paper Trail!" I (Floyd) Opened The Tier Door To Secure Inmate Dennis On The Tier And He Stop At Cell D29 And Stated "This Won'T Happen Today Because This Motherfucker Won'T Let Me Go But He Will Be Getting His Coming!" At That Time I Directed Inmate Dennis To Go To His Cell And Lock In. Inmate Dennis Stated "Fuck You Punk, You Don'T Scare Me!" At That Time I Directed Inmate Dennis To Come Off The Tier Because Of His Behavior And He Was Cuffed And Secured In The Dayroom. Lt. John Salas Was Notified Of Inmate Dennis Being Secured In The Dayroom And Arrived At The Building At 1415 Hrs.

Reporting Officer: Floyd, Steven R (CO Corporal/Sgt. - Large Inst.)**Immediate Action Taken**Immediate action taken by: Floyd, Steven R -CO Corporal/Sgt. - Large Inst.

Notified Lt. John Salas Submitted 404 And 122

Offender Disposition DetailsDisposition: N/ADate: N/ATime: N/ACell secured? NoReason: N/ADisposition Of Evidence: N/A**Approval Information**Approved: ☒ Disapproved: ☐ Approved By: Salas, John (Staff Lt./Lt)Comments: N/A**Shift Supervisor Details**Date Received: 10/30/2006Time: 14:59Received From: **Shift Supervisor Determination:**

☐ Upon reviewing this Disciplinary Report, I conclude that the offense may be properly responded to by an immediate revocation of the following privileges(see reverse side) for _____ hours not to exceed 24 hours)

☒ Upon reviewing this Disciplinary Report, I conclude that the offense would be properly responded to by Disciplinary Hearing.

Salas, John (Staff Lt./Lt)

Disciplinary#
1028179

DCC Delaware Correctional Center

Date: 10/30/2006

Smyrna Landing Road

SMYRNA DE, 19977

Phone No. 302-653-9261

DISCIPLINARY REPORTDisciplinary Type: Class1Housing Unit Bldg EIR#: 1036745

I have received a copy of this notice on DATE: _____ TIME: _____ and have been informed of my rights to have a hearing and to present evidence on my own behalf. I understand, if found guilty, I will be subject to imposition of sanctions outlined in the Rules of conduct.

Preliminary Hearing
Officer: _____

Salas, John

Offender: _____

Dennis, Roger L

10/30/2006
1028179DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone#: 302-653-9261

Date: 10/30/2006

NOTICE OF DISCIPLINARY HEARING - FOR MINOR/MAJOR OFFENSETO: Inmate: Dennis, Roger LSBI#: 00241736Housing Unit: Bldg E

1. You will be scheduled to appear before the Hearing Office to answer charges pending against you. (Staff are to explain the charges as listed on the 122.)
2. At that time, a hearing will be held to determine whether you violated Institutional Rule(s) as alleged in the attached Disciplinary Report.
How do you plead ? ☐ Guilty ☒ Not Guilty
3. A "Minor Offense" is a rule violation in which the extent of the sanction to be imposed shall be restricted to:
 - a. Written Reprimand
 - b. Loss of one or more privileges for a period of time of more than 24 hours but not to exceed 15 days.
4. A "Major Offense" is a rule violation in which the extent of the sanction to be imposed shall be restricted to:
 - a. Loss of one or more privileges for a period of time not to exceed 90 days.
 - b. Confinement to assigned quarters for a period of time not to exceed 90 days.
 - c. Isolation confinement for a period of time not to exceed 90 days.
 - d. Loss of good time for a period of time not to exceed 90 days.
(Forfeiture of accumulated good time shall be subject to the approval of the Commissioner or his designee.)
5. You have the right in the disciplinary process as stated on the lower and back of this page.
These have been fully explained to you at the time of this notification.
6. Counsel requested No Name of Counsel:
7. Confront accuser? Yes
8. Witness requested? Yes Name of Witness: Marion, Johnson

I certify that on 10/30/2006 at 15:03 , I
served upon the above inmate this notice of
Disciplinary Hearing for Minor/Major Offense and
the Disciplinary Report is attached hereto.

I have received copies of 122 & 127 and
understand my rights as Form # 127 has
been read to me

(Employee's Signature & Title)
Salas, John

(Inmate's Signature)
Dennis, Roger L

Disciplinary#
1027749DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

Date: 11/09/2006

DISCIPLINARY REPORT

Disciplinary Type: Class1

Housing Unit Bldg E

IR#: 1036120

SBI#	Inmate Name	Inst. Name	Location Of Incident	Date	Time
00241736	Dennis, Roger L	DCC	Bldg.E D Tier	10/05/2006	13:20

Violations: 1.06/200.203 Disorderly or Threatening Behavior, 2.05 Disrespect, 2.06/200.108 Failing to Obey an Order

Witnesses: 1. Lingenfelter, Kevin

2. N/A

3. N/A

Description of Alleged Violation(s)

On The Above Date And Approximate Time I/M Dennis, Roger Sbi#00241736 Returned To The Building Right Before Count Time. I/M Dennis Stated That He Had To Go Right Back Out, Because He Had An Appointment. I C/O Perry, Stephanie Told I/M Dennis That We Had To Count First, As We Just Returned From Chow. C/O Lingenfelter Then Called Count Time, At Which Time All D-Tier Inmates Closed Their Doors Except For Cell #40. I C/O Perry Then Told Cell #40 To Close Their Door And I/M Dennis Came Out Of Cell #40 And Shouted Something. I C/O Perry Then Asked I/M Dennis To Repeat Himself, He Then Yelled Something Else And Slammed The Door. After I/M Dennis Secured His Door, C/O Lingenfelter Could Start His Count. Eor

Reporting Officer: Perry, Stephanie (Correctional Officer)

Immediate Action Taken

Immediate action taken by: Perry, Stephanie -Correctional Officer

Notified Area Lt.

Offender Disposition Details

Disposition: N/A

Date: N/A

Time: N/A

Cell secured? No

Reason: N/A

Disposition Of Evidence: N/A

Approval Information

Approved: [x] Disapproved: [] Approved By: Godwin, Derrick R (Staff Lt./Lt)

Comments: N/A

Shift Supervisor Details

Date Received: 10/11/2006

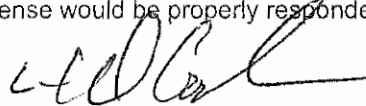
Time: 15:01

Received From: __

Shift Supervisor Determination:

☐ Upon reviewing this Disciplinary Report, I conclude that the offense may be properly responded to by an immediate revocation of the following privileges(see reverse side) for _____ hours not to exceed 24 hours)

☒ Upon reviewing this Disciplinary Report, I conclude that the offense would be properly responded to by Disciplinary Hearing.


 Godwin, Derrick R (Staff Lt./Lt)

I have received a copy of this notice on DATE: _____ TIME: _____ and have been informed of my rights to have a hearing and to present evidence on my own behalf. I understand, if found guilty, I will be subject to imposition of sanctions outlined in the Rules of conduct.

Preliminary Hearing
Officer:

 Godwin, Derrick R

Offender:

Dennis, Roger L

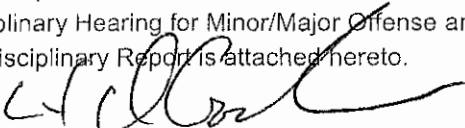
11/09/2006
1027749DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone#: 302-653-9261

Date: 11/09/2006


NOTICE OF DISCIPLINARY HEARING - FOR MINOR/MAJOR OFFENSETO: Inmate: Dennis, Roger LSBI#: 00241736Housing Unit: Bldg E

1. You will be scheduled to appear before the Hearing Office to answer charges pending against you. (Staff are to explain the charges as listed on the 122.)
2. At that time, a hearing will be held to determine whether you violated Institutional Rule(s) as alleged in the attached Disciplinary Report.
How do you plead ? ☐ Guilty ☒ Not Guilty
3. A "Minor Offense" is a rule violation in which the extent of the sanction to be imposed shall be restricted to:
 - a. Written Reprimand
 - b. Loss of one or more privileges for a period of time of more than 24 hours but not to exceed 15 days.
4. A "Major Offense" is a rule violation in which the extent of the sanction to be imposed shall be restricted to:
 - a. Loss of one or more privileges for a period of time not to exceed 90 days.
 - b. Confinement to assigned quarters for a period of time not to exceed 90 days.
 - c. Isolation confinement for a period of time not to exceed 90 days.
 - d. Loss of good time for a period of time not to exceed 90 days.
 (Forfeiture of accumulated good time shall be subject to the approval of the Commissioner or his designee.)
5. You have the right in the disciplinary process as stated on the lower and back of this page. These have been fully explained to you at the time of this notification.
6. Counsel requested No Name of Counsel:
7. Confront accuser? Yes
8. Witness requested? Yes Name of Witness:

I certify that on _____ at _____, I
served upon the above inmate this notice of
Disciplinary Hearing for Minor/Major Offense and
the Disciplinary Report is attached hereto.


 (Employee's Signature & Title)

I have received copies of 122 & 127 and
understand my rights as Form # 127 has
been read to me


 (Inmate's Signature)
 Dennis, Roger L

11/09/2006
1027749

DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone#: 302-653-9261

Date: 11/09/2006

NOTICE OF DISCIPLINARY HEARING - FOR MINOR/MAJOR OFFENSE

INMATE RIGHTS IN THE DISCIPLINARY PROCESS

MINOR OFFENSE :

Right to Remain Silent: If you are charged criminally based upon the same facts giving rise to the disciplinary process, you have the right to remain silent at the Disciplinary Hearing. If you choose to remain silent, your silence will not be considered against you at the Disciplinary Hearing. In all other circumstances, silence at the Disciplinary Hearing may be considered against you.

Presence: You have the right to be present at all phases of the hearing, except that you may be excluded during the Hearing Officer's deliberations and at any time your behavior becomes disruptive to the proceedings. Reason for such exclusions shall be stated in writing.

**DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER**

This request is for (circle one): **MEDICAL DENTAL MENTAL HEALTH**

A.K.A. MR. ROGER DAVIS JR.

Al-Muhammed Alask Shabazz

Name (Print)

E-Bldg #408

Housing Location

April 13th

Date of Birth

00241736

SBI Number

9-19-06

Date Submitted

Complaint (What type of problem are you having)?

My mood the last is being blocked out by other meds and serious stress, and I need to see a mental health physician to have me increased and a evaluation to be done. I've been edgy at Ratoles and very stressed also request to speak to Denys. I've been hiding a lot of my feelings

Al-Muhammed Alask Shabazz
Inmate Signature aka Roger Davis Jr

9-19-06

Date

The below area is for medical use only. Please do not write any further.

S: Scheduled

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

A: _____

P: _____

E: _____

Provider Signature & Title

Date & Time

3/1/99 DE01

FORM#:

MED

263

**Correctional Medical Services
Mental Health Unit**

June 1, 2006

Mr. Dennis,

Mental Health was unable to meet with you today due to my schedule. I was unable to bring up your case during the meeting, but I will definitely make it a point to do so at our next meeting in a week.

I will meet with you next week on Tuesday, June 6.

Thanks,

Mental Health Unit.
Maximum Housing Unit
DCC.



STATE OF DELAWARE
DEPARTMENT OF CORRECTION
OFFICE OF THE WARDEN
DELAWARE CORRECTIONAL CENTER
1181 Paddock Road
SMYRNA, DELAWARE 19977
Telephone: (302) 653-9261
Fax: (302) 653-2855

MEMORANDUM

TO: Sherry Scharff-Ames

FROM: Robert E. Snyder *[Signature]*
Warden

DATE: December 1, 2000

RE: Termination from employment within Delaware
Department of Correction

As a result of your personal involvement and relationship with an inmate at the Delaware Correctional Center you are permanently barred from entering upon any property of the Delaware Department of Correction.

Failure to comply with this order shall constitute trespassing and result in criminal prosecution.

I, Sherry Scharff-Ames acknowledge receipt of the above notification.

[Signature]
Sherry Scharff-Ames

12/1/00
Date

[Signature]
Witnessed

12/1/00
Date

BOARD OF ELECTRICAL EXAMINERS
REAL ESTATE COMMISSION
BOARD OF PILOT COMMISSIONERS
BOARD OF ACCOUNTANCY
REGISTRATION FOR PROFESSIONAL LAND SURVEYORS
BOARD OF ARCHITECTS
BOARD OF CHIROPRACTIC
BOARD OF COSMETOLOGY AND BARBERING
BOARD OF DENTAL EXAMINERS
BOARD OF MEDICAL PRACTICE
BOARD OF NURSING
BOARD OF EXAMINERS IN OPTOMETRY
BOARD OF PHARMACY
BOARD OF PLUMBING EXAMINERS
EXAMINING BOARD OF PHYSICAL THERAPISTS
BOARD OF PODIATRY
ADULT ENTERTAINMENT COMMISSION
COUNCIL ON REAL ESTATE APPRAISERS
GOVERNOR'S MAGISTRATE SCREENING COMMITTEE



STATE OF DELAWARE
DIVISION OF PROFESSIONAL REGULATION
CANNON BUILDING,
861 SILVER LAKE BLVD., STE. 203
DOVER, DELAWARE 19904-2467

BOXING LICENSES
GAMING CONTROL BOARD
BOARD OF GEOLOGISTS
BOARD OF LANDSCAPE ARCHITECTURE
DEADLY WEAPONS DEALERS
BOARD OF EXAMINERS OF PSYCHOLOGISTS
BOARD OF FUNERAL SERVICES
BOARD OF VETERINARY MEDICINE
BOARD OF EXAM. OF NURSING HOME ADMIN.
BOARD OF EXAMINERS OF SPEECH/LANGUAGE
PATHOLOGISTS, AUDIOLOGISTS AND
HEARING AID DISPENSERS
BOARD OF CLINICAL SOCIAL WORK EXAMINERS
BOARD OF PROFESSIONAL COUNSELORS OF
MENTAL HEALTH
BOARD OF OCCUPATIONAL THERAPY
PHYSICIAN ASSISTANT ADVISORY COUNCIL
BOARD OF MASSAGE AND BODYWORK
COMMITTEE OF DIETETICS/NUTRITION
RESPIRATORY CARE PRACTICE ADVISORY COUNCIL

December 21, 2000

TELEPHONE: (302) 739-4522
FAX: (302) 739-2711

Complaint # 11-49-00

Sherry Scharff-Ames
121 Teak Court Acorn Arms
Dover, Delaware 19901

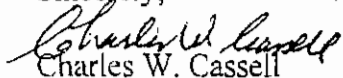
Dear Ms. Scharff - Ames:

The Division of Professional Regulation has received a complaint, a copy of which is enclosed. This Division's investigative unit is responsible for the conduct of investigations related to complaints against professional licensees. Please respond to this complaint, in writing, to the Division office within twenty (20) days.

A contact person from the Board of Nursing, will be appointed, but any inquiries should be directed to the Division. At the conclusion of the investigation, the Division, in consultation with the contact person, will determine whether to close the case or forward the case to the Attorney General for review. The Attorney General's office may agree that the case warrants prosecution or may close the case. If the complaint is prosecuted, an administrative hearing would be held before the appropriate board or commission. You would be provided with appropriate notice and could appear with or without counsel.

In order to ensure that members of the board or commission can remain unbiased prior to such a hearing, information about the investigation will be shared only with the contact person. Any communication with other board or commission members could result in those individuals disqualifying themselves from participation in any hearing. Therefore, you are urged to contact the Division directly with any information or inquiries pertaining to this matter.

Sincerely,


Charles W. Cassell

Investigative Administrator
Cc: Board of Nursing



STATE OF DELAWARE
DEPARTMENT OF CORRECTION
OFFICE OF THE INSTITUTIONAL INVESTIGATOR
DELAWARE CORRECTIONAL CENTER

1181 Paddock Road
SMYRNA, DELAWARE 19977
Telephone: (302) 653-9261
Fax: (302) 653-2855

December 12, 2000

Mr. William Cassell
Division of Professional Regulation
Cannon Building
861 Silver Lake Blvd.
Suite 203
Dover, De. 19904

Dear Bill,

I conducted an investigation here at the Delaware Correctional Center involving an inmate and a Correctional Medical Services employee, Sherry Scharff-Ames, white female, date of birth June 29, 1955. Ms. Ames is a licensed practical nurse. As a result of the investigation, letters from Ms. Ames were confiscated wherein she wrote about being blackmailed by another inmate who was aware of her relationship with inmate Roger Dennis. Ms. Ames also wrote that she had given Percocet pills to inmate Dennis to be subsequently given to inmate William Coleman to maintain his silence.

Ms. Ames was interviewed by me in the presence of CMS administrators, Georgia Perdue and Aaron Pendry. When questioned about the Percocet pills, Ms. Ames admitted to providing the pills as stated in her letter. I advised her she could be arrested for the sale of a narcotic drug. Ms. Ames immediately stated the pills were only Tylenol, which she represented to be Percocet.

I subsequently interviewed inmate Coleman after Ms. Ames' termination. Inmate Coleman advised me he had received approximately sixty Percocet pills, which Ms. Ames had provided.

Ms. Ames was clearly a security threat to this institution and admittedly engaged in unprofessional conduct. I am apprising you of this information to possibly curtail similar incidents of this nature in the future. Should you have any questions, please contact me and I will provide any additional information as necessary.

Very Truly Yours,

A handwritten signature in cursive script, appearing to read "Ron Drake".

Ron Drake
Investigator

**Correctional Medical Services
Mental Health Unit**

June 8, 2006

Mr. Dennis,

Your case was discussed today in our meeting. Regarding your ear, you have been scheduled for an outside appointment. Also, I emailed your counselor regarding lack of contact with your mother. She informed me that she would make another referral to the Chaplain to assist with this.

Thanks,

Ms. Monet
Mental Health Unit.

A. W. A. S. Received Sat June 10th 06

aclu delaware

Dear Friend:

We have received complaints from many Delaware prisoners and detainees that they are being denied care for serious medical and mental health problems. We are currently conducting an investigation to try to find out whether these complaints are the result of major faults in the State's system for delivering medical and mental health care to prisoners and detainees. If we find in our investigation that there really are serious system-wide problems, we will seriously consider bringing a class action lawsuit on behalf of Delaware prisoners, seeking improvements in the medical and mental care system in the State's prisons and jails.

Although we very much want to help improve conditions for Delaware prisoners and detainees, there are many factors that will determine whether we can take further action. One of the obstacles is that the law requires prisoners to "exhaust administrative remedies" before filing any lawsuit about prison conditions. This means that the courts do not allow *any* prisoner or detainee to file *any* lawsuit complaining about prison conditions until he or she *completes* the prison grievance process.

Therefore, if you have recently been denied care for some serious medical or mental health need, it is very important that you complete the prison grievance process if you want to preserve your right to sue later. You should carefully review the grievance procedures before you file a grievance. If you don't have a copy of the grievance procedures, there should be a copy for you to review in the library or in the counselor's or Inmate Grievance Chairperson's office. We are sending you this letter to explain to you our understanding of how the Delaware grievance process works, in hopes that it will help you successfully complete the grievance process, should you choose to do so.

FILING THE GRIEVANCE

1. If you believe you have been wrongly denied treatment or otherwise received inadequate medical or mental health care, you should file a Form #585 **immediately**. Ask the prison law librarian or other prison staff member for one of these forms. **If you wait to file a grievance, you may lose your right to sue in court.** The general deadline for filing grievances is **within 7 days** of the "incident" that the grievance is about. (This deadline may not apply to medical grievances, but to be on the safe side, you should always file your medical grievances right away.)

There are four parts to Section #1 of a medical grievance. You must complete them all:

Date & Time of Medical Incident: If you have a chronic (long-term) illness, there may not be a specific date or time that you are complaining about. In that case, you should write "ongoing."

Type of medical problem: In this part, you must explain what medical problems you are having and why you don't think you are getting proper care.

Be as specific as possible. State what your medical or mental health conditions are, and state what kind of treatment you are complaining about – for example, that you are being denied medication, a test or procedure, an exam by a doctor or specialist, or an accommodation for a disability. You should also note if you believe you are getting the wrong care or the care you need is being wrongly delayed.

Whenever you can, include names, job titles or descriptions of all people you believe are responsible for the lack of treatment or bad treatment you're receiving. **In all of your grievances, you should name Correctional Medical Services, the Corrections Commissioner (Stan Taylor) and the warden of your facility as being responsible.**

Write about current problems. You should use the grievance procedures to complain about problems you are having now. If you complain about old problems that are no longer bothering you, your grievance may be dismissed as being untimely

Signature & Date: Be sure to remember to sign and date the grievance before you submit it.

Action Requested by Grievant: Write here what you want staff to do to help the problem. Don't worry about putting down the "right" request here. If you're not sure what should be done, it is good enough to ask that they give you adequate medical or mental health care. If you want money damages, you should write that here too.

2. Once you have completed your grievance, drop it in the grievance mailbox.
3. **Keep extra copies of everything you file**, if at all possible. If prison staff later lose the grievance or fail to respond to it, you can prove that you did file one out if you make an extra copy.

PRESERVING YOUR RIGHT TO APPEAL THE GRIEVANCE

4. After you file a Form #585, one of the medical staff may speak with you about the grievance. That staff member may try get you to sign a statement saying that the problem has been resolved.

CAUTION:

If you sign this statement saying that the problem has been resolved, it will end the grievance process and you will not be able to appeal the grievance. It is also

possible that if you don't appeal the grievance, a court might later bar you from filing a lawsuit on this issue. Even if the prison medical staff or prison officials promise to provide you with all or some of the care you are asking for, this is not a guarantee that you will get that care. Therefore, as a general rule, we believe it may be better not to sign the informal resolution – unless you are sure you have already been given everything you need and were asking for.

GRIEVANCE HEARING

5. If you don't sign the statement, there should be a hearing before three members of the medical staff, called the Medical Grievance Committee.

6. The hearing officers may again ask you to sign a statement saying that the problem has been resolved. Again, if you sign the statement, you will lose your right to appeal and you may lose your right to file a lawsuit later.

APPEALING THE DECISION

7. After the hearing, **you should immediately file an appeal.** The general deadline for grievances is **within 3 days** of receiving the decision.

- To file an appeal, you should use the same Form #585 that you filed your original grievance on. You should get this form back by the end of the hearing. If you don't, you should ask the medical grievance committee to return it.
- The grievance procedures require you to explain the reasons for your appeal. It is probably safest if your answers cover everything that you believe was wrong with the Medical Grievance Committee decision. If you received no relief from the Medical Grievance Committee, you should re-state all of the problems you identified in your grievance. Before you file your appeal, you should carefully review your grievance and make sure the appeal covers all of the same issues.
- Be sure to **sign and date** the appeal.

8. Once you have received a decision on your appeal from the Bureau Chief of Prisons, you have completed the grievance process.

SEND US COPIES OF YOUR COMPLETED GRIEVANCES

9. It is very important that you save all of the paperwork you get from the grievance process. Once you have completed the process you should send a copy of all of your paperwork to:

**Julia Graff
Staff Attorney
ACLU of Delaware
100 West 10th Street, Suite 309
Wilmington, DE 19801**

If you send us the originals, we will make a copy for you and send back the originals.

You may be unable to get a decision from the Bureau Chief of Prisons because prison officials fail to respond to your grievance or appeal, or because prison officials refuse to consider your grievance. If this happens, or if you are unable to complete the grievance process for any reason, write to us about your problem and send us copies of the paperwork that you have received so far.

If you have any other questions about how to use the grievance process, you should ask the law librarian or the inmate grievance chairperson for help. You may also write to us and we can try to help you through the process.

Sincerely,

Drewery Fennell
Julia Graff
ACLU of Delaware

Margaret Winter
Eric Balaban
Jeffrey Monks
ACLU National Prison Project

January 10, 2007

You are scheduled for an audiogram (hearing test) and a return visit to the ENT for a follow up. No MRI has been recommended yet.

Thank you
Debbie Rodweller, Medical

DCC Delaware Correctional Center
 Smyrna Landing Road
 SMYRNA DE, 19977
 Phone No. 302-653-9261

Date: 04/17/2007

INFORMAL RESOLUTION

OFFENDER GRIEVANCE INFORMATION

Offender Name : DENNIS, ROGER L	SBI# : 00241736	Institution : DCC
Grievance # : 77863	Grievance Date : 10/22/2006	Category : Individual
Status : Resolved	Resolution Status: Level 1	Inmate Status :
Grievance Type: Staff Issues	Incident Date : 10/22/2006	Incident Time : 09:00
IGC : Merson, Lise M	Housing Location : Bldg 17, Lower, Tier C, Cell 7, Single	

INFORMAL RESOLUTION

Investigator Name : Scarborough, James	Date of Report 11/02/2006
--	---------------------------

Investigation Report :

Reason for Referring:

Investigator Name : Fowler, Guy	Date of Report 11/02/2006
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Investigation Report :

Reason for Referring: Captain Fowler, please assign a Supervisor to investigate this matter. Thanks.

Investigator Name : Fowler, Guy	Date of Report 11/09/2006
---------------------------------	---------------------------

Investigation Report :

Reason for Referring:

Investigator Name : Godwin, Derrick R	Date of Report 11/09/2006
---------------------------------------	---------------------------

Investigation Report :

Reason for Referring: LT Godwin,
 Investigate this ASAP. Interview the nurse and CPL Burton as well as the inmate. Complete this and
 IF resolved, return an INMATE SIGNED copy of this grievance to the Grievance Office NLT 11/13/06.

Investigator Name : Scarborough, James	Date of Report 02/14/2007
--	---------------------------

Investigation Report :

Reason for Referring: Maj. Scarborough,
 There has been no investigation or resolution done on this grievance. Please assist us in have this
 grievance investigated. Thank You,
 Cpl. Merson

Investigator Name : Fowler, Guy	Date of Report 02/14/2007
---------------------------------	---------------------------

Investigation Report :

Reason for Referring: Captain Fowler, somehow this report found its way back to me without being investigated. Please
 have this grievance investigated and findings submitted to IGC immediately.

Investigator Name : Godwin, Derrick R	Date of Report 02/18/2007
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Investigation Report :

DCC Delaware Correctional Center
 Smyrna Landing Road
 SMYRNA DE, 19977
 Phone No. 302-653-9261

Date: 04/17/2007

INFORMAL RESOLUTION

OFFENDER GRIEVANCE INFORMATION

Offender Name : DENNIS, ROGER L	SBI# : 00241736	Institution : DCC
Grievance # : 77863	Grievance Date : 10/22/2006	Category : Individual
Status : Resolved	Resolution Status: Level 1	Inmate Status :
Grievance Type: Staff Issues	Incident Date : 10/22/2006	Incident Time : 09:00
IGC : Merson, Lise M	Housing Location : Bldg 17, Lower, Tier C, Cell 7, Single	

Investigator Name : Godwin, Derrick R

02/18/2007

Reason for Referring: Lt. Godwin, if you have investigated this grievance and it can't be resolved send it (not resolved) back to the IGC officer, Capt. McCreanor ASAP

Investigator Name : Scarborough, James

Date of Report 03/26/2007

Investigation Report :

Reason for Referring: Maj. Scarborough,
 This grievance has now reached the 150 day warning. We need an investigation ASAP.
 Thank You,
 Cpl. Merson

Investigator Name : Fowler, Guy

Date of Report 03/26/2007

Investigation Report :

Reason for Referring: Compliance issue. Please get this taken care of immediately and have findings forwarded to IGC.

Investigator Name : Henry, Janice

Date of Report 03/27/2007

Investigation Report :

Reason for Referring:

Investigator Name : Fowler, Guy

Date of Report 03/28/2007

Investigation Report :

Reason for Referring: To Capt. Fowler

Investigator Name : Godwin, Derrick R

Date of Report 03/29/2007

Investigation Report :

Reason for Referring: LT Godwin, This investigation must be completed ASAP. You will see how

Investigator Name : Simon, Joseph S

Date of Report 03/29/2007

Investigation Report :

DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

Date: 04/17/2007

INFORMAL RESOLUTION**OFFENDER GRIEVANCE INFORMATION**

Offender Name : DENNIS, ROGER L	SBI# : 00241736	Institution : DCC
Grievance # : 77863	Grievance Date : 10/22/2006	Category : Individual
Status : Resolved	Resolution Status: Level 1	Inmate Status :
Grievance Type: Staff Issues	Incident Date : 10/22/2006	Incident Time : 09:00
IGC : Merson, Lise M	Housing Location : Bldg 17, Lower, Tier C, Cell 7, Single	

Investigator Name : Simon, Joseph S

03/29/2007

Will speak to Cpl Burton and remind her that she is not to interfere with any medical business at all.
This is not an accusation of her but a reminder as to what extent her authority is.

Reason for Referring:**Offender's Signature:** _____**Date :** _____**Witness (Officer) :** _____**GRIEVANCE INFORMATION - IGC**

DCC Delaware Correctional Center
 Smyrna Landing Road
 SMYRNA DE, 19977
 Phone No. 302-653-9261

Date: 04/17/2007

OFFENDER GRIEVANCE INFORMATION

Offender Name : DENNIS, ROGER L	SBI# : 00241736	Institution : DCC
Grievance # : 77863	Grievance Date : 10/22/2006	Category : Individual
Status : Resolved	Resolution Status : Level 1	Inmate Status :
Grievance Type: Staff Issues	Incident Date : 10/22/2006	Incident Time : 09:00
IGC : Merson, Lise M	Housing Location : Bldg 17, Lower, Tier C, Cell 7, Single	

IGC

Medical Provider: _____ **Date Assigned** _____

Comments:

☐ Forward to MGC ☐ Forward to Medical Provider ☐ Warden Notified

☐ Forward to RGC **Date Forwarded to MGC :** _____

☒ Offender Signature Captured **Date Offender Signed** : 04/17/2007

Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

DISCIPLINARY HEARING DECISION

Inmate: <u>Dennis, Roger L.</u>	SBI#: <u>00241736</u>	Type: <u>Class 1</u>
Institution: <u>DCC Delaware Correctional Center</u>	Hearing Date: <u>05/05/2004</u>	Time: <u>09:30</u>
Inmate Present: <u>Yes</u> Reason (If No): <u>N/A</u>		
Violation: <u>N/A</u>		
Inmate PLEA: <u>Not Guilty</u>		
Inmate Statement: <u>I do inventory sheet. Its not my job to secure door. He gave someone permission to go in there. I wasnt there when someone came in there.</u>		
Witness Name: <u>Shabazz, Malcolm I/M</u>		
Testimony: <u>Wasnt there do not anything.</u>		
Witness Name: <u>Young, Tom I/M</u>		
Testimony: <u>Dont know anything about it. Wasnt there Cook Wayne handles inventory.</u>		
Decision: <u>Guilty</u>		
Rational: <u>Counsel denied inmate capable of representing self has done so in past several times. During confrontation C/O Wayne said there were 30 on the shut and inmate changed it to 29. Inmate is in charge of store and responsible for anything that comes out of store room. Inmate found guilty of all charges.</u>		
Sanctions: <u>N/A</u>		
HEARING OFFICER'S SIGNATURE		
<u>Savage, Larry</u>		

I understand that I may appeal the decision of a Class II Hearing to the Class I Hearing Officer. I may appeal the decision of a Class I Hearing to the facility administrator. I also understand that I have 72 hours to submit my notice of appeal in writing to the Class I Hearing Officer if I am appealing a Class II Hearing decision or the Warden if I am appealing a Class I Hearing decision.

I ☒ DO ☐ DO NOT INTEND TO APPEAL

INMATE'S SIGNATURE

ORDER TO IMPLEMENT SANCTIONS

- | | |
|---|---|
| <input type="checkbox"/> Inmate does not wish to appeal | <input checked="" type="checkbox"/> Appeal has been denied by Commissioner or Designate |
| <input type="checkbox"/> Sanctions have been modified | <input type="checkbox"/> Time Limit (72 Hours since hearing) for appeal has expired |

It is hereby ordered to implement the sanctions:

Sanctions	Start Date	Days	End Date
1. Confinement to Quarter	04/23/2007	10	05/02/2007

This Inmate has

NO TIME

TO Serve

CL 7

James Satterfield

4.22.07

Said times kept this action
is voided & pulled from my
file

(Mon) 4-2-07 The Attorney
2:35pm Jf, Attorney

Clo Hedge who brought
the paperwork to 10:10pm

LEVEL-2
ASAC 4-15-07

DL12

FORM #584

DENNIS, ROGER

GRIEVANCE FORM

FACILITY: Dale Carr CenterDATE: June 10th 07 received / 5-11-07GRIEVANT'S NAME: Abd-Muhammed A. ShabazzSBI#: 00241736CASE#: 115583 12/763TIME OF INCIDENT: Thurs 4pm to 12 7:30pm 5-10-07HOUSING UNIT: MHU 21 D-Lover 12

(on going)

BRIEFLY STATE THE REASON FOR THIS GRIEVANCE. GIVE DATES AND NAMES OF OTHERS INVOLVED IN THE INCIDENT OR ANY WITNESSES.

I'm appealing your decision on this case. You already have the original grievance. Read the action being you said I can't ask for discipline against a officer c/o Derselle Brown

ACTION REQUESTED BY GRIEVANT:

Full Investigation and that the proper authorities discipline her for her actions and that she be reimbursed for property

GRIEVANT'S SIGNATURE: Abd-Muhammed A. ShabazzDATE: 6-10-07

WAS AN INFORMAL RESOLUTION ACCEPTED? _____ (YES) _____ (NO)

(COMPLETE ONLY IF RESOLVED PRIOR TO HEARING)

GRIEVANT'S SIGNATURE: _____

DATE: _____

IF UNRESOLVED, YOU ARE ENTITLED TO A HEARING BY THE RESIDENT GRIEVANCE COMMITTEE.

cc: INSTITUTION FILE
GRIEVANT

RECEIVED

JUN 15 2007

Instructions for Submitting a Regular Grievance

Inmates are required, per DOC Procedure 4.4 [Inmate Grievance Procedure] to attempt to resolve complaints prior to filing a regular grievance. Grievances are to be submitted within seven(7) days from the date of the occurrence or incident or within seven days after the inmate became aware of the incident. The grievance is to be placed in the grievance box located in each housing unit.

Only one issue per grievance form will be addressed. If the grievance is submitted on a weekend or a holiday, it will be received during the next working day.

Return of Unprocessed Grievance

Intake Action: This Grievance Form is being returned to the inmate under the provisions outlined in DOC Procedure 4.4 "Inmate Grievance Procedure" for the following reason(s):

Vulgar/Abusive or Threatening Language. The language that is unacceptable has been highlighted. The grievance may be resubmitted omitting this language.

Non-Grievable. This issue has been defined as non-grievable in accordance with DOC Policy 4.4. These procedures have their own appeal process that must be followed. Disciplinary Action Parole Decision
Classification Action

Request. Requests are not processed through the grievance procedure. Please correspond with the appropriate office to secure the information that is requested.

Duplicate Grievance(s). This issue has been addressed previously in Grievance # _____.

Original Grievances must be submitted to the Inmate Grievance Chairperson. Photocopies are not accepted.

Inquiry on behalf of other inmates. Inmates cannot submit grievances for other inmates.

Expired filing period. Grievance exceeds seven(7) days from date of occurrence.

*READ THE HOUSING RULES REGARDING
GRIEVANCES*

Cpl M. [Signature]
Inmate Grievance Chairperson

8/20/07
Date

Emergency Grievance

FORM #584

CL7

GRIEVANCE FORM

FACILITY: Dela Cour Center DATE: 2-26-07
 GRIEVANT'S NAME: Al-Muhammad Alesk Hakeez SBI#: 00241736
 CASE#: 109667 TIME OF INCIDENT: 8:35 pm
 HOUSING UNIT: SHU Bldg 17C Tower 7#

BRIEFLY STATE THE REASON FOR THIS GRIEVANCE, GIVE DATES AND NAMES OF OTHERS INVOLVED IN THE INCIDENT OR ANY WITNESSES.

8:35pm meds came around, and I had ~~an~~ empty inhaler there for nurse Bette J. Bryant, and Sgt. Padella, put himself in the middle of me getting important meds for ~~my~~ my health ~~from~~ with nurse pump. Bette told him if I don't have one to trade I won't get one. Then left the tier without saying anything to me, and left the tier.

I will be documenting this, and sending a copy to the Top Warden, Commissioner, and Bureau Chief. This won't be tolerated, and if nothing is done about this disrespectful officer, and nurse I'll push a lawsuit Negligence.

ACTION REQUESTED BY GRIEVANT: That the proper action is taken against Sgt. Padella as well as Nurse Bette J. Bryant. You always say I can't request punishment, so I request the Deputy Warden David Price, Ward Council, and Deputy Warden Boris guess the officer proper discipline.

GRIEVANT'S SIGNATURE: Al-Muhammad A. Hakeez DATE: 2-26-07
A. Hakeez

WAS AN INFORMAL RESOLUTION ACCEPTED? ☐ (YES) ☐ (NO)

(COMPLETE ONLY IF RESOLVED PRIOR TO HEARING)

GRIEVANT'S SIGNATURE: _____ DATE: _____

IF UNRESOLVED, YOU ARE ENTITLED TO A HEARING BY THE RESIDENT GRIEVANCE COMMITTEE.

cc: INSTITUTION FILE
 GRIEVANT

RECEIVED

April '97 REV

FEB 28 2007

Inmate Grievance Office

Instructions for Submitting a Regular Grievance

Inmates are required, per DOC Procedure 4.4 [Inmate Grievance Procedure] to attempt to resolve complaints prior to filing a regular grievance. Grievances are to be submitted within seven(7) days from the date of the occurrence or incident or within seven days after the inmate became aware of the incident. The grievance is to be placed in the grievance box located in each housing unit.

Only one issue per grievance form will be addressed. If the grievance is submitted on a weekend or a holiday, it will be received during the next working day.

Return of Unprocessed Grievance

Intake Action: This Grievance Form is being returned to the inmate under the provisions outlined in DOC Procedure 4.4 "Inmate Grievance Procedure" for the following reason(s):

Vulgar/Abusive or Threatening Language. The language that is unacceptable has been highlighted. The grievance may be resubmitted omitting this language.

Non-Grievable. This issue has been defined as non-grievable in accordance with DOC Policy 4.4. These procedures have their own appeal process that must be followed. Disciplinary Action Parole Decision
Classification Action

Request. Requests are not processed through the grievance procedure. Please correspond with the appropriate office to secure the information that is requested.

Duplicate Grievance(s). This issue has been addressed previously in Grievance # _____.

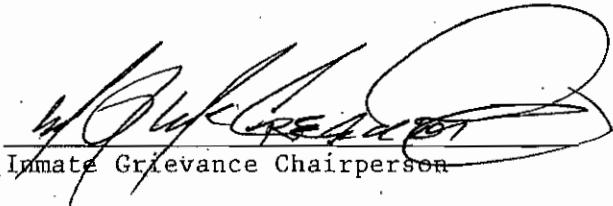
Original Grievances must be submitted to the Inmate Grievance Chairperson. Photocopies are not accepted.

Inquiry on behalf of other inmates. Inmates cannot submit grievances for other inmates.

Expired filing period. Grievance exceeds seven(7) days from date of occurrence.

POLICY IS INMATES MUST TURN IN AN EMPTY INHABER FOR A NEW ONE.

IMC CANNOT REQUEST DISCIPLINARY ACTION AGAINST STAFF.


Inmate Grievance Chairperson

3-13-07
Date

FORM #584

GRIEVANCE FORM

FACILITY: Delaware Correctional CenterDATE: 5-11-07GRIEVANT'S NAME: Al-Muhammad A. Shabazz
alias Mr. Roger Dennis Jr.SBI#: 00241736CASE#: 115583TIME OF INCIDENT: Thursday 4pm to 12 7:30pm 5-10-07HOUSING UNIT: MHU 21 D-Lower 12

BRIEFLY STATE THE REASON FOR THIS GRIEVANCE. GIVE DATES AND NAMES OF OTHERS INVOLVED IN THE INCIDENT OR ANY WITNESSES.

Time and Date above C/O Desselie Brown on 4pm to 12 shift took Inventory of my property, and a lot of my property came up missing. A Brand mailer stamped envelopes (\$5), some legal letters, receipts of money I've paid the Court, and proof of legal fees, and she took personal news paper clippings, and my glasses were chipped and scratched. This is totally ludicrous, and ridiculous, and I think she should be held responsible. I have the Copies of Inventory, and nothing she took she never put on the sheet. Photographs in my photo album were ripped out, and she must be held accountable.

ACTION REQUESTED BY GRIEVANT:

I request I be reimbursed for my property, and that she is properly disciplined by her superiors for the disrespect, and destruction of my property. I would like to be there when the accused is confronted with these charges.

GRIEVANT'S SIGNATURE: Al-Muhammad A. Shabazz
alias Mr. Roger Dennis Jr.DATE: 5-11-07

WAS AN INFORMAL RESOLUTION ACCEPTED?

(YES)

(NO)

(COMPLETE ONLY IF RESOLVED PRIOR TO HEARING)

GRIEVANT'S SIGNATURE: _____

DATE: _____

IF UNRESOLVED, YOU ARE ENTITLED TO A HEARING BY THE RESIDENT GRIEVANCE COMMITTEE.

cc: INSTITUTION FILE
GRIEVANT

RECEIVED

MAY 15 2007

April '97 REV

Inmate Grievance Office

Instructions for Submitting a Regular Grievance

Inmates are required, per DOC Procedure 4.4 [Inmate Grievance Procedure] to attempt to resolve complaints prior to filing a regular grievance. Grievances are to be submitted within seven(7) days from the date of the occurrence or incident or within seven days after the inmate became aware of the incident. The grievance is to be placed in the grievance box located in each housing unit.

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Return of Unprocessed Grievance

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Non-Grievable. This issue has been defined as non-grievable in accordance with DOC Policy 4.4. These procedures have their own appeal process that must be followed. Disciplinary Action Parole Decision
Classification Action

Request. Requests are not processed through the grievance procedure. Please correspond with the appropriate office to secure the information that is requested.

Duplicate Grievance(s). This issue has been addressed previously in Grievance # _____.

Original Grievances must be submitted to the Inmate Grievance Chairperson. Photocopies are not accepted.

Inquiry on behalf of other inmates. Inmates cannot submit grievances for other inmates.

Expired filing period. Grievance exceeds seven(7) days from date of occurrence.

INMATES CANNOT REQUEST STAFF BE DISCIPLINED

Cpl. M. [Signature]
Inmate Grievance Chairperson

5/21/07
Date

Inmate Received June 6, 2007

274

Emergency Medical Grievance

FORM #585

MEDICAL GRIEVANCE

CL7

FACILITY: Dolo Correctional CenterDATE SUBMITTED: 2-26-07INMATE'S NAME: Al-Muhammed Aleet Shabazz aka Dennis JrSBI#: 00241736HOUSING UNIT: SHU Bldg 17 C-Lower 7#CASE #: 102683

SECTION #1

DATE & TIME OF MEDICAL INCIDENT: 8:32 pm

TYPE OF MEDICAL PROBLEM:

Nurse Bette J. Bryant got real sick with the Tongue & did not take my asthma pump, and told Sgt. Padilla if I didn't have one to trade I wasn't getting one, but she didn't even come back to get the empty pump to get me a new one. She put my health in jeopardy, and this is not the first time.

GRIEVANT'S SIGNATURE:

Al-Muhammed Aleet Shabazz
aka Roger Dennis Jr.

DATE: 2-26-07

ACTION REQUESTED BY GRIEVANT:

That she is moved from the SHU area, and put on suspension without pay, and that I get a apology, and her boss uses proper discipline if my request seems to harsh.

RECEIVED

DATE RECEIVED BY MEDICAL UNIT: _____

FEB 28 2007

NOTE: EMERGENCY MEDICAL CONDITIONS WILL TAKE PRIORITY. OTHERWISE, Inmate Grievance Office GRIEVANCES WILL BE ADDRESSED AT THE WEEKLY MEDICAL COMMITTEE MEETING.

MEDICAL GRIEVANCE FORM #585

Page two

SECTION #2

IF GRIEVANT DOES NOT AGREE TO THE DECISION OF THE MEDICAL GRIEVANCE COMMITTEE THEY MUST RESPOND, IN WRITING, WITHIN TWO DAYS OF THE RECEIPT OF THE DECISION. SPACE FOR AN APPEAL HAS BEEN PROVIDED ON THIS FORM IN SECTION #3.

RESPONSE BY M.G.C.: _____

DATE RECEIVED BY GRIEVANT: _____ GRIEVANT SIGNATURE: _____

DOES GRIEVANT ACCEPT M.G.C. DECISION? _____ (YES) _____ (NO)

SECTION #3

IF YOU WISH TO APPEAL PLEASE USE THE SPACE PROVIDED BELOW TO EXPLAIN WHY:

GRIEVANT'S SIGNATURE: _____ DATE: _____

ORIGINAL: INSTITUTION FILE

COPY: GRIEVANT

Instructions for Submitting a Regular Grievance

Inmates are required, per DOC Procedure 4.4 [Inmate Grievance Procedure] to attempt to resolve complaints prior to filing a regular grievance. Grievances are to be submitted within seven (7) days from the date of the occurrence or incident or within seven days after the inmate became aware of the incident. The grievance is to be placed in the grievance box located in each housing unit.

Only one issue per grievance form will be addressed. If the grievance is submitted on a weekend or a holiday, it will be received during the next working day.

Return of Unprocessed Grievance

Intake Action: This Grievance Form is being returned to the inmate under the provisions outlined in DOC Procedure 4.4 "Inmate Grievance Procedure" for the following reason(s) :

☐ **Vulgar/Abusive or Threatening Language.** The Language that is unacceptable has been highlighted. The grievance may be resubmitted omitting this language.

☐ **Non-Grievable.** This issue has been defined as non-grievable in accordance with DOC Policy 4.4. These procedures have their own appeal process that must be followed.

☐ **Disciplinary Action**

☐ **Parole Decision**

☐ **Classification Action**

☐ **Request:** Requests are not processed through the grievance procedure. Please correspond with the appropriate Office to secure the information that is requested.

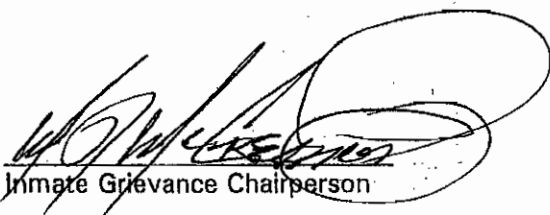
☐ **Duplicate Grievance(s).** This issue has been addressed previously in Grievance # _____.

☐ **Original Grievances must be submitted to the Inmate Grievance Chairperson.** Photocopies are not accepted.

☐ **Inquiry on behalf of other inmates.** Inmates cannot submit grievances for other inmates.

☐ **Expired Filing period.** Grievance exceeds seven (7) days from date of occurrence.

INMATES CANNOT REQUEST STAFF BE DISCIPLINED OR REASSIGNED


Inmate Grievance Chairperson

3-13-07
Date

3-28-07
5/11/07
P3137

Case 1:06-cv-00372-GMS Docum

(Emergency Grievance)

2/1/2007 Page 102 of 112

DENNIS, ROGER

FORM #584

GRIEVANCE FORM

FACILITY: DeLaune Core Center

DATE: March 6th 07

GRIEVANT'S NAME: Al-Muhammed Abook Shalaby

SBI#: 00241736

CASE#: alias Roger Denington
102443

TIME OF INCIDENT: 2:40 pm

HOUSING UNIT: SHU Bldg 17C-Lower 7[#]

BRIEFLY STATE THE REASON FOR THIS GRIEVANCE. GIVE DATES AND NAMES OF OTHERS INVOLVED IN THE INCIDENT OR ANY WITNESSES.

During a shake down there was cookies 1 by the Name of A. Hanna
a flm name unknown and Sgt Kershaw Liguies-Srancis, and they
disrespected my property, my religion and my legal
material. Sgt Liguies-Srancis threw away some active
legal work where I am in court right now and then
she allowed her cookies to throw away stuff that
should've never been thrown out. Her and I got into
a heated argument, and she talked about my mother, and
after that I let her have it. Two wrongs don't make it right,
but she started a war she won't win, especially throwing away federal
mail. Plus she threw my dictionary away.

ACTION REQUESTED BY GRIEVANT: That this is ran up the chain to Major David K. Norman the Security Chief, and Deputy Warden David Pierce Deputy Warden Buring, and Warden Carroll, so they can decide the proper action to take against this Beligent Officer.
I will not back down from this. If no action is taken I will push a Federal suit, and have her arrested.

GRIEVANT'S SIGNATURE: Al-Muhammad Aleek Shalaby
aka Roger Dennis Jr

DATE: 3-06-07

WAS AN INFORMAL RESOLUTION ACCEPTED?

_____ (YES) _____ (NO)

(COMPLETE ONLY IF RESOLVED PRIOR TO HEARING)

GRIEVANT'S SIGNATURE: _____

DATE: _____

IF UNRESOLVED, YOU ARE ENTITLED TO A HEARING BY THE RESIDENT GRIEVANCE COMMITTEE.

cc: INSTITUTION FILE
GRIEVANT

RECEIVED

April '97 REV

MAR 08 2007

Lamete Grievance Office:

Instructions for Submitting a Regular Grievance

Inmates are required, per DOC Procedure 4.4 [Inmate Grievance Procedure] to attempt to resolve complaints prior to filing a regular grievance. Grievances are to be submitted within seven(7) days from the date of the occurrence or incident or within seven days after the inmate became aware of the incident. The grievance is to be placed in the grievance box located in each housing unit.

Only one issue per grievance form will be addressed. If the grievance is submitted on a weekend or a holiday, it will be received during the next working day.

Return of Unprocessed Grievance

Intake Action: This Grievance Form is being returned to the inmate under the provisions outlined in DOC Procedure 4.4 "Inmate Grievance Procedure" for the following reason(s):

Vulgar/Abusive or Threatening Language. The language that is unacceptable has been highlighted. The grievance may be resubmitted omitting this language.

Non-Grievable. This issue has been defined as non-grievable in accordance with DOC Policy 4.4. These procedures have their own appeal process that must be followed. Disciplinary Action Parole Decision
Classification Action

Request. Requests are not processed through the grievance procedure. Please correspond with the appropriate office to secure the information that is requested.

Duplicate Grievance(s). This issue has been addressed previously in Grievance # _____.

Original Grievances must be submitted to the Inmate Grievance Chairperson. Photocopies are not accepted.

Inquiry on behalf of other inmates. Inmates cannot submit grievances for other inmates.

Expired filing period. Grievance exceeds seven(7) days from date of occurrence.

INMATES CANNOT REQUEST STAFF BE DISCIPLINED


Inmate Grievance Chairperson

3-14-07
Date

270

DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

Date: 04/17/2007

GRIEVANCE REPORT

OFFENDER GRIEVANCE INFORMATION

Offender Name : DENNIS, ROGER L	SBI# : 00241736	Institution : DCC
Grievance # : 77863	Grievance Date : 10/22/2006	Category : Individual
Status : Resolved	Resolution Status : Level 1	Resol. Date : 04/17/2007
Grievance Type: Staff Issues	Incident Date : 10/22/2006	Incident Time : 09:00
IGC : Merson, Lise M	Housing Location : Bldg 17, Lower, Tier C, Cell 7, Single	

OFFENDER GRIEVANCE DETAILS

Description of Complaint: Inmate claims: Per my chart and Dr. Vondoozle my BP is checked once a week, but as needed when I have a headache & blurred vision, because of meds & chronicle care. Cpl. M. Burton which is there to provide security not tell the nurse what her job is and especially not to be in a confidential file. she's violated all the above, and this is a violation of my rights. She told the nurse whom took my BP not to sign her name on the care, because I'm not supposed to have them, But they are for my immediate treatment, and to let the Sgt. know that I'm excused to leave the bldg at these times or as needed. If I didn't have them Sgt. Floyd or other officers would not let me out. she threatened to get with D/W Pierce. Granted! I also have a court order about my treatments, and special orders from the doctor, because of my emergency health situation. I found out the nurses name is Emily, B/C, Reddish B/hair Jamaican Haitian ascent. this started because she's looking at old dates before I got this new medical order that says my next BP check would be Nov. 2nd 06.

Remedy Requested : That this is brought before the medical doctor & Medical director, and D/W Pierce, and Major Scarborough about his security officers whom are not minding their business and are in confidential medical situations, and he needs to be dealt with accordingly.

INDIVIDUALS INVOLVED

Type	SBI #	Name
------	-------	------

ADDITIONAL GRIEVANCE INFORMATION

Medical Grievance : NO	Date Received by Medical Unit :
Investigation Sent :	Investigation Sent To : Scarborough, James
Grievance Amount :	

**Delaware Department of Correction
Health Care Services Fee Sheet**

Inmate Name Lennis Rogers SBI # 241736
(Last, First MI)

Facility DCC Date 6-4-07

<input type="checkbox"/>	Chargeable Visit	\$4.00
<input checked="" type="checkbox"/>	Non Chargeable Visit	-0-
<input type="checkbox"/>	Medication Handling Fee (\$2.00 X _____)	\$ _____

Total Amount Charged To Inmate Account \$ 0

Health Care Staff Signature: KC

I CERTIFY BY MY SIGNATURE THAT I HAVE RECEIVED THE SERVICES DESCRIBED ABOVE.

Inmate Signature: Abdullah Muhammad Date: 6-4-07

1) *Witness Signature: _____ Date: _____

2) *Witness Signature: _____ Date: _____

The fee for services rendered will be deducted from your inmate account even if the amount deducted generates a negative balance. Any funds received by you will first be applied to any negative balance. Any negative balance remaining on your account when you are released will remain active for three (3) years after the date of release. Should you return to Delaware Department of Correction as an inmate within that three (3) year period, the negative balance will be applied to your inmate account on your new commitment.

Distribution:

Original: Facility Business Office Posted/Entered by _____ Date _____
Copy: Inmate Medical Record (yellow)
Inmate (pink)

*Only needed if inmate refuses or is unable to sign.

FORM #: 621

3 part NCR

Delaware Department of Correction Health Care Services Fee Sheet

Inmate Name Dennis, Roger SBI # 241736
(Last, First MI)

Facility DCC Date 7/25/07

☐ Chargeable Visit \$4.00
☒ Non Chargeable Visit -0-
☐ Medication Handling Fee (\$2.00 X) \$

Total Amount Charged To Inmate Account \$ 0

Health Care Staff Signature: X

I CERTIFY BY MY SIGNATURE THAT I HAVE RECEIVED THE SERVICES DESCRIBED ABOVE.

Inmate Signature: X 4/1/07 Date: 7/25/07

1) *Witness Signature: _____ Date: _____

2) *Witness Signature: _____ Date: _____

The fee for services rendered will be deducted from your inmate account even if the amount deducted generates a negative balance. Any funds received by you will first be applied to any negative balance. Any negative balance remaining on your account when you are released will remain active for three (3) years after the date of release. Should you return to Delaware Department of Correction as an inmate within that three (3) year period, the negative balance will be applied to your inmate account on your new commitment.

Distribution:

Original: Facility Business Office Posted/Entered by _____ Date _____
 Copy: Inmate Medical Record (yellow)
 Inmate (pink)

*Only needed if inmate refuses or is unable to sign.

FORM #: 621

3 part NCR

Delaware Department of Correction Health Care Services Fee Sheet

Inmate Name Lennis, Roger SBI # 241736
(Last, First MI)

Facility DCC Date 8/13/07

☐ Chargeable Visit \$4.00
☒ Non Chargeable Visit -0-
☐ Medication Handling Fee (\$2.00 X) \$

Total Amount Charged To Inmate Account \$ 0

Health Care Staff Signature: KC

I CERTIFY BY MY SIGNATURE THAT I HAVE RECEIVED THE SERVICES DESCRIBED ABOVE.

Inmate Signature: [Signature] Date: 8/13/07

1) *Witness Signature: _____ Date: _____

2) *Witness Signature: _____ Date: _____

The fee for services rendered will be deducted from your inmate account even if the amount deducted generates a negative balance. Any funds received by you will first be applied to any negative balance. Any negative balance remaining on your account when you are released will remain active for three (3) years after the date of release. Should you return to Delaware Department of Correction as an inmate within that three (3) year period, the negative balance will be applied to your inmate account on your new commitment.

Distribution:

Original: Facility Business Office Posted/Entered by _____ Date _____
 Copy: Inmate Medical Record (yellow)
 Inmate (pink)

*Only needed if inmate refuses or is unable to sign.

FORM #: 621

3 part NCR

Delaware Department of Correction Health Care Services Fee Sheet

Inmate Name Dennis, Roger SBI # 341736
(Last, First MI)

Facility Dec Date 3/1/07

<input type="checkbox"/>	Chargeable Visit	\$4.00
<input checked="" type="checkbox"/>	Non Chargeable Visit	-0-
<input type="checkbox"/>	Medication Handling Fee (\$2.00 X _____)	\$ _____

Total Amount Charged To Inmate Account \$ 0

Health Care Staff Signature: A.

I CERTIFY BY MY SIGNATURE THAT I HAVE RECEIVED THE SERVICES DESCRIBED ABOVE.

Inmate Signature: [Signature] Date: 3/1/07

1) *Witness Signature: _____ Date: _____

2) *Witness Signature: _____ Date: _____

The fee for services rendered will be deducted from your inmate account even if the amount deducted generates a negative balance. Any funds received by you will first be applied to any negative balance. Any negative balance remaining on your account when you are released will remain active for three (3) years after the date of release. Should you return to Delaware Department of Correction as an inmate within that three (3) year period, the negative balance will be applied to your inmate account on your new commitment.

Distribution:

Original: Facility Business Office Posted/Entered by _____ Date _____
Copy: Inmate Medical Record (yellow)
Inmate (pink)

*Only needed if inmate refuses or is unable to sign.

FORM #: 621

3 part NCR

(Chemical Care Visit)

Delaware Department of Correction Health Care Services Fee Sheet

Inmate Name Jennings, Roger SBI # 241736
(Last, First MI)

Facility DCC Date 4/24/07

☐ Chargeable Visit \$4.00
☒ Non Chargeable Visit -0-
☐ Medication Handling Fee (\$2.00 X) \$

Total Amount Charged To Inmate Account \$ 0

Health Care Staff Signature: [Signature]

I CERTIFY BY MY SIGNATURE THAT I HAVE RECEIVED THE SERVICES DESCRIBED ABOVE.

Inmate Signature: [Signature] Date: 4/24/07

1) *Witness Signature: Date:

2) *Witness Signature: Date:

The fee for services rendered will be deducted from your inmate account even if the amount deducted generates a negative balance. Any funds received by you will first be applied to any negative balance. Any negative balance remaining on your account when you are released will remain active for three (3) years after the date of release. Should you return to Delaware Department of Correction as an inmate within that three (3) year period, the negative balance will be applied to your inmate account on your new commitment.

Distribution:

Original: Facility Business Office Posted/Entered by Date
Copy: Inmate Medical Record (yellow)
Inmate (pink)

*Only needed if inmate refuses or is unable to sign.

FORM #: 621

3 part NCR

**Delaware Department of Correction
Health Care Services Fee Sheet**

Inmate Name Dennis, Rodney SBI # 241736

(Last, First MI)

Facility DOC Date 1/29/07

☒ Chargeable Visit \$4.00
☐ Non Chargeable Visit -0-
☐ Medication Handling Fee (\$2.00 X _____) \$ _____

Total Amount Charged To Inmate Account \$ 4

Health Care Staff Signature: [Signature]

I CERTIFY BY MY SIGNATURE THAT I HAVE RECEIVED THE SERVICES DESCRIBED ABOVE.

Inmate Signature: [Signature] Date: 1-29-07

1) *Witness Signature: _____ Date: _____

2) *Witness Signature: _____ Date: _____

The fee for services rendered will be deducted from your inmate account even if the amount deducted generates a negative balance. Any funds received by you will first be applied to any negative balance. Any negative balance remaining on your account when you are released will remain active for three (3) years after the date of release. Should you return to Delaware Department of Correction as an inmate within that three (3) year period, the negative balance will be applied to your inmate account on your new commitment.

Distribution:

Original: Facility Business Office Posted/Entered by _____ Date _____

Copy: Inmate Medical Record (yellow)
 Inmate (pink)

*Only needed if inmate refuses or is unable to sign.

FORM #: 621

3 part NCR

Delaware Department of Correction Health Care Services Fee Sheet

Inmate Name Dennis, Roger SBI # 241736
(Last, First MI)

Facility DL Date 1/25/67

<input type="checkbox"/> Chargeable Visit	\$4.00
<input checked="" type="checkbox"/> Non Chargeable Visit	-0-
<input type="checkbox"/> Medication Handling Fee (\$2.00 X <input type="text"/>)	\$ <input type="text"/>

Total Amount Charged To Inmate Account \$ 0

Health Care Staff Signature: _____

I CERTIFY BY MY SIGNATURE THAT I HAVE RECEIVED THE SERVICES DESCRIBED ABOVE.

Inmate Signature: [Signature] Date: 1/25/07

1) *Witness Signature: _____ **Date:** _____

2) *Witness Signature: _____ Date: _____

The fee for services rendered will be deducted from your inmate account even if the amount deducted generates a negative balance. Any funds received by you will first be applied to any negative balance. Any negative balance remaining on your account when you are released will remain active for three (3) years after the date of release. Should you return to Delaware Department of Correction as an inmate within that three (3) year period, the negative balance will be applied to your inmate account on your new commitment.

Distribution:

Original: Facility Business Office Posted/Entered by _____ Date _____

Copy: Inmate Medical Record (yellow)
Inmate (pink)

*Only needed if inmate refuses or is unable to sign.

FORM #: 621

3 part NCR

IN: Al-Muhammad Alak Shalaby
SBI# 00241736 UNIT MHW Bldg 21 D-June 18#

DELAWARE CORRECTIONAL CENTER
1181 PADDOCK ROAD
SMYRNA, DELAWARE 19977



Office of the Clerk
United States District Court
844 N. King Street Suite Box 18
Wilmington, Delaware
19801-3570

(Emergency Attn)

"Legal Mail"